| Fill in this information to identify your case: |                                                                           |                                      |
|-------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------|
| United States Bankruptcy Court for the :        |                                                                           |                                      |
| NORTHERN District of ILLINOIS (State)           |                                                                           |                                      |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

## Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:           | Identify Yourself                                                                                |                            |                                               |
|-------------------|--------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------------------|
|                   |                                                                                                  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your           | full name                                                                                        |                            |                                               |
| goverr<br>identif | the name that is on your<br>nment-issued picture<br>ication (for example,<br>iriver's license or | Ronald First name John     | First name                                    |
| passp             | ·                                                                                                | Middle name Stewart        | Middle name                                   |
| identif           | your picture<br>ication to your meeting<br>ne trustee.                                           | Last name                  | Last name                                     |
|                   |                                                                                                  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
|                   | her names you                                                                                    |                            |                                               |
| have<br>years     | used in the last 8                                                                               | First name                 | First name                                    |
|                   | e your married or<br>n names.                                                                    | Middle name                | Middle name                                   |
|                   |                                                                                                  | Last name                  | Last name                                     |
|                   |                                                                                                  | First name                 | First name                                    |
|                   |                                                                                                  | Middle name                | Middle name                                   |
|                   |                                                                                                  | Last name                  | Last name                                     |
| your              | the last 4 digits of<br>Social Security                                                          | xxx - xx - <u>8077</u>     | XXX - XX                                      |
| Indivi            | er or federal<br>dual Taxpayer<br>fication number                                                | OR                         | OR                                            |
| iuentii           | ncation number                                                                                   | <b>9</b> xx - xx           | <b>9</b> xx - xx                              |

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Document Stewart Ronald John Debtor 1 Case Number (if known)

|    |                                                                                                                                                | About Debtor 1:                                                                                                                                     | About Debtor 2 (Spouse Only in a Joint Case):                                                                                                   |
|----|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name  Business name  EIN  EIN                                                                                                              | I have not used any business names or EINs.  Business name  Business name  EIN  EIN                                                             |
| 5. | Where you live                                                                                                                                 | 510 Montrose Drive                                                                                                                                  | If Debtor 2 lives at a different address:                                                                                                       |
|    |                                                                                                                                                | Number Street Unit                                                                                                                                  | Number Street                                                                                                                                   |
|    |                                                                                                                                                | Romeoville IL 60446 City State ZIP Code                                                                                                             | City State ZIP Code                                                                                                                             |
|    |                                                                                                                                                | WILL<br>County                                                                                                                                      | County                                                                                                                                          |
|    |                                                                                                                                                | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
|    |                                                                                                                                                | Number Street                                                                                                                                       | Number Street                                                                                                                                   |
|    |                                                                                                                                                | P.O. Box                                                                                                                                            | P.O. Box                                                                                                                                        |
|    |                                                                                                                                                | City State ZIP Code                                                                                                                                 | City State ZIP Code                                                                                                                             |
| 6. | Why you are choosing this district to file for                                                                                                 | Check one:                                                                                                                                          | Check one:                                                                                                                                      |
|    | bankruptcy.                                                                                                                                    | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                            |
|    |                                                                                                                                                | have another reason. Explain. (See 28 U.S.C. § 1408                                                                                                 | I have another reason. Explain.<br>(See 28 U.S.C. § 1408                                                                                        |
|    |                                                                                                                                                |                                                                                                                                                     |                                                                                                                                                 |
|    |                                                                                                                                                |                                                                                                                                                     |                                                                                                                                                 |
|    |                                                                                                                                                |                                                                                                                                                     |                                                                                                                                                 |

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Case Number (if known)

Document Stewart Ronald John Debtor 1

| Pa  | Tell the Court About Your                                                                                                                   | Bankruptcy Case                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under                                                                  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12  Chapter 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 8.  | How you will pay the fee                                                                                                                    | <ul> <li>I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).</li> <li>I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul> |
| 9.  | Have you filed for bankruptcy within the last 8 years?                                                                                      | ■ No           Yes. District         None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate? | ■ No    Yes. Debtor Relationship to you District When Case Number, if known   MM / DD / YYYY    Debtor Relationship to you   District When Case Number, if known   MM / DD / YYYY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 11. | Do you rent your residence?                                                                                                                 | ■ No. Go to line 12 □ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? □ No. Go to line 12. □ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

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|----------|--------------|-------------|-----------|------------------------|-----------|
| Debtor 1 | Ronald       | John        | Stewart   | Case Number (if known) |           |
|          | First Name   | Middle Name | Last Name |                        |           |

|     | Report About Any Busine                                                                                                                     | esses You Ow    | n as a Sole Proprietor                  |                                      |                                                                                |
|-----|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------------|--------------------------------------|--------------------------------------------------------------------------------|
| 12. | Are you a sole proprietor of any full- or part-time business?                                                                               | ■ No.<br>□ Yes. | Go to Part 4.<br>Name and location of b | business                             |                                                                                |
|     | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as                       |                 | Name of business, if any                |                                      |                                                                                |
|     | a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it                      |                 | Number Street                           |                                      |                                                                                |
|     | to this petition.                                                                                                                           |                 | City                                    |                                      | State Zip Code                                                                 |
|     |                                                                                                                                             |                 | Check the appropriate                   | box to describe your business:       |                                                                                |
|     |                                                                                                                                             |                 | ☐ Health Care Busi                      | iness (as defined in 11 U.S.C. § 10  | 1(27A))                                                                        |
|     |                                                                                                                                             |                 | ☐ Single Asset Rea                      | al Estate (as defined in 11 U.S.C. § | 101(51B))                                                                      |
|     |                                                                                                                                             |                 | ☐ Stockbroker (as o                     | defined in 11 U.S.C. § 101(53A))     |                                                                                |
|     |                                                                                                                                             |                 | ☐ Commodity Broke                       | er (as defined in 11 U.S.C. § 101(6  | ))                                                                             |
|     |                                                                                                                                             |                 | ☐ None of the abov                      | /e                                   |                                                                                |
|     | For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).                                                                | □ No. I         | the Bankruptcy Code.                    | 11, but I am NOT a small busines:    | s debtor according to the definition in tor according to the definition in the |
| Pa  | Report if You Own or Have                                                                                                                   | ve Any Hazard   | lous Property or Any Prop               | perty That Needs Immediate Attenti   | on                                                                             |
| 14. | Do you own or have any<br>property that poses or is<br>alleged to pose a threat                                                             | No.             | What is the hazard?                     |                                      |                                                                                |
|     | of imminent and indentifiable hazard to public health or safety? Or do you own any                                                          |                 |                                         |                                      |                                                                                |
|     | property that needs<br>immediate attention?<br>For example, do you own<br>perishable goods, or livestock<br>that must be fed, or a building |                 | If immediate attention is               | needed, why is it needed?            |                                                                                |
|     | that needs urgent repairs?                                                                                                                  |                 | Where is the property?                  |                                      |                                                                                |
|     |                                                                                                                                             |                 | which is the property:                  | Number Street                        |                                                                                |
|     |                                                                                                                                             |                 | , -                                     |                                      |                                                                                |
|     |                                                                                                                                             |                 |                                         |                                      |                                                                                |

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John

Document Stewart

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Debtor 1

Ronald

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About I | Debtor 1 |
|---------|----------|
|---------|----------|

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing a | about |
|-------------------------------------------|-------|
| credit counseling because of:             |       |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-25901 Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main

Debtor 1 Ronald John Stewart Page 6 of 58

Case Number (if known)

| 16. | What kind of debts do                                  |                                                  | consumer debts? Consumer debts are de primarily for a personal, family, or household                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-----|--------------------------------------------------------|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|     | you have?                                              | No. Go to line 16b.  Yes. Go to line 17.         | primarily for a personal, family, of flousefiold                                                            | purpose.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|     |                                                        |                                                  | business debts? Business debts are debts estment or through the operation of the busine                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                                        | No. Go to line 16c.                              | surient of unough the operation of the busine                                                               | ss of investment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|     |                                                        | Yes. Go to line 17.                              | on that are not account adds as however                                                                     | Libra                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|     |                                                        | 16c. State the type of debts you o               | we that are not consumer debts or business o                                                                | lebts.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 7.  | Are you filing under Chapter 7?                        | No. I am not filing under Ch                     | napter 7. Go to line 18.                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     | Do you estimate that after                             |                                                  | er 7. Do you estimate that after any exempt p                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     | any exempt property is                                 | No.                                              | is are paid that funds will be available to distric                                                         | oute to unsecured creditors?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|     | excluded and administrative expenses                   | Yes.                                             |                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     | are paid that funds will be available for distribution | <u> Птез.</u>                                    |                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     | to unsecured creditors?                                |                                                  |                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 8.  | How many creditors do                                  | ■ 1-49                                           | 1,000-5,000                                                                                                 | 25,001-50,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|     | you estimate that you owe?                             | ☐ 50-99<br>☐ 100-199                             | ☐ 5,001-10,000<br>☐ 10,001-25,000                                                                           | ☐ 50,001-100,000<br>☐ More than 100,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|     |                                                        | 200-999                                          | _ ,,,, ,,,,,                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 9.  | How much do you                                        | \$0-\$50,000                                     | \$1,000,001-\$10 million                                                                                    | \$500,000,001-\$1 billion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|     | estimate your assets to be worth?                      | \$50,001-\$100,000<br>\$100,001-\$500,000        | ☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million                                                    | ☐\$1,000,000,001-\$10 billion<br>☐\$10,000,000,001-\$50 billion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                                        | \$500,001-\$1 million                            | \$100,000,001-\$500 million                                                                                 | ☐More than \$50 billion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 0.  | How much do you                                        | \$0-\$50,000                                     | ☐ \$1,000,001-\$10 million                                                                                  | □\$500,000,001-\$1 billion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|     | estimate your liabilities to be?                       | \$50,001-\$100,000                               | \$10,000,001-\$50 million                                                                                   | \$1,000,000,001-\$10 billion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|     | to be?                                                 | ■ \$100,001-\$500,000<br>□ \$500,001-\$1 million | ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million                                                  | ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Pa  | t 7: Sign Below                                        |                                                  |                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| or  | you                                                    | •                                                | I declare under penalty of perjury that the info                                                            | rmation provided is true and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 0.  | you                                                    | correct.                                         |                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                                        |                                                  | ter 7, I am aware that I may proceed, if eligible<br>nderstand the relief available under each chap         | The state of the s |
|     |                                                        |                                                  | did not pay or agree to pay someone who is rd read the notice required by 11 U.S.C. § 3426                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                                        | I request relief in accordance with              | the chapter of title 11, United States Code, sp                                                             | ecified in this petition.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|     |                                                        | <u> </u>                                         | nent, concealing property, or obtaining money<br>in fines up to \$250,000, or imprisonment for u<br>d 3571. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|     |                                                        | /s/ Ronald John Stewa                            | ·                                                                                                           | ture of Dobter 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|     |                                                        | Signature of Debtor 1                            | Signa                                                                                                       | ture of Debtor 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|     |                                                        | Executed on08/11/2016                            |                                                                                                             | ited on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|     |                                                        | MM / DD                                          | / <b>YYYY</b>                                                                                               | MM / DD / YYYY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

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| Debtor 1 | Ronald     | John        | Stewart   | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Adam Emil Suchy            | Date     | Date: 08/11/2016        |  |
|----------------------------------|----------|-------------------------|--|
| Signature of Attorney for Debtor | 54.0     | MM / DD / YYYY          |  |
| Adam Emil Suchy                  |          |                         |  |
| Printed name                     |          |                         |  |
| Geraci Law L.L.C.                |          |                         |  |
| Firm name                        |          |                         |  |
| 55 E. Monroe St., #3400          |          |                         |  |
| Number Street                    |          |                         |  |
|                                  |          |                         |  |
| Chicago                          | IL       | 60603                   |  |
| City                             | State    | ZIP Code                |  |
| Contact Phone312-332-1800        | Email ad | dressndil@geracilaw.com |  |
| 6307115                          | IL       |                         |  |
| Bar number                       | State    |                         |  |

| Fill in this information to identify your case:                                              |            |             |           |  |  |
|----------------------------------------------------------------------------------------------|------------|-------------|-----------|--|--|
| Debtor 1                                                                                     | Ronald     | John        | Stewart   |  |  |
|                                                                                              | First Name | Middle Name | Last Name |  |  |
| Debtor 2                                                                                     |            |             |           |  |  |
| (Spouse, if filing)                                                                          | First Name | Middle Name | Last Name |  |  |
| United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) |            |             |           |  |  |
| Case Number                                                                                  |            |             | _         |  |  |
| (If known)                                                                                   |            |             |           |  |  |

# Check if this is an amended filing

## Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Summarize Your Assets                                                                                                                                                                                                      |                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
|                                                                                                                                                                                                                            | <b>Your assets</b> Value of what you own |
| Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B                                                                                                                   | \$ 173,824                               |
| 1b. Copy line 62, Total personal property, from Schedule A/B                                                                                                                                                               | \$ 79,100                                |
| 1c. Copy line 63, Total of all property on Schedule A/B                                                                                                                                                                    | \$ 252,924                               |
|                                                                                                                                                                                                                            |                                          |
| Summarize Your Liabilities                                                                                                                                                                                                 |                                          |
|                                                                                                                                                                                                                            | Your liabilities<br>Amount you owe       |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol> | \$138,428                                |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                                                | <u>\$0</u>                               |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                                                                                                                          | <u>\$13,905</u>                          |
|                                                                                                                                                                                                                            |                                          |
| Summarize Your Liabilities                                                                                                                                                                                                 |                                          |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I                                                                                                               | \$9,579.36                               |
| Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J                                                                                                                  | \$6,447.00                               |
|                                                                                                                                                                                                                            |                                          |

Case 16-25901 Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main Page 9 of 58 Document Ronald Debtor 1 John Case Number (if known) \_ First Name Middle Name Last Name **EntriesDescription AssetsAmount LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 13,242.56 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

|                     | Caso 16 2                   |                             |                                     | tered 08/12/16   | 6 09:19:10 Des                                    | sc Main                                                 |
|---------------------|-----------------------------|-----------------------------|-------------------------------------|------------------|---------------------------------------------------|---------------------------------------------------------|
| Fill in this in     | formation to identify       | your case and this filing   | g:                                  | 0 of 58          |                                                   |                                                         |
| Debtor 1            | Ronald                      | John                        | Stewart                             |                  |                                                   |                                                         |
|                     | First Name                  | Middle Name                 | Last Name                           |                  |                                                   |                                                         |
| Debtor 2            |                             |                             |                                     |                  |                                                   |                                                         |
| (Spouse, if filing) | First Name                  | Middle Name                 | Last Name                           |                  |                                                   |                                                         |
| United States       | Bankruptcy Court for the    | e: <u>NORTHERN</u> District |                                     |                  |                                                   |                                                         |
| Case Number         | -                           |                             | (State)                             |                  | [                                                 | Check if this is an                                     |
| (If known)          |                             |                             |                                     |                  |                                                   | amended filing                                          |
| official F          | orm 106A/B                  |                             |                                     |                  |                                                   |                                                         |
|                     | e A/B: Prop                 | erty                        |                                     |                  |                                                   | 12/15                                                   |
| Part 1:             | Describe Each Resider       |                             | her Real Esate You Own or Have an   |                  |                                                   |                                                         |
| No. Yes.            | Describe                    | or oquituble interest in e  | y 1001a01190, Danaing, Iana, O. O   | a. proporty .    |                                                   |                                                         |
|                     |                             |                             | What is the property? Check all the | nat apply.       |                                                   | claims or exemptions. Put                               |
| 510 Monti           | rose Dr                     |                             | Single-family home                  |                  | •                                                 | ured claims on Schedule D:<br>laims Secured by Property |
| Street addre        | ess, if available, or other | description                 | Duplex or multi-unit building       |                  |                                                   |                                                         |
|                     |                             |                             | Condominium or cooperative          |                  | Current value of the<br>entire property?          | Current value of the portion you own?                   |
|                     |                             |                             | Manufactured or mobile home         |                  |                                                   |                                                         |
| Romeovill           | le                          | IL 60446 State ZIP Code     | Land                                |                  | \$173,824.                                        | 00 \$ 86,912.00                                         |
| City                |                             | State ZIP Code              | Investment property  Timeshare      |                  |                                                   |                                                         |
| County              |                             |                             | Other                               |                  | Describe the nature                               | •                                                       |
| County              |                             |                             |                                     |                  | interest (such as fee<br>the entireties, or a lif |                                                         |
|                     |                             |                             | Who has an interest in the property | erty? Check one. |                                                   |                                                         |
|                     |                             |                             | Debtor 1 only  Debtor 2 only        |                  |                                                   |                                                         |
|                     |                             |                             | Debtor 1 and Debtor 2 only          |                  | Check if this is a                                | a community property                                    |
|                     |                             |                             | At least one of the debtors and     | another          | (see instructions)                                | )                                                       |
|                     |                             |                             | Other information you wish to a     |                  | h as local                                        |                                                         |
|                     |                             |                             | property identification number:     |                  |                                                   |                                                         |

Official Form 106A/B Record # 715366 Schedule A/B: Property Page 1 of 7

\$86,912.00

2. Add the dollar value of the portion you own for all of your entries fro Part 1, including any entries for pages

you have attached for Part 1. Write that number here ..... -->

Entered 08/12/16 09:19:10 Page 11 of a 58 miles (if known) Case 16-25901 Doc 1 Filed 08/12/16 Desc Main Ronald Debtor 1 <del>Döcüment</del> First Name **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 03. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Describe..... Gmc Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Sierra 1500 Model: Creditors Who Have Claims Secured by Property

| Year: Approximate Mileage:                                                                                  | 160,000                          | Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another                                                                         | Current value entire proper                                                       |                                      | Current va   |                                     |
|-------------------------------------------------------------------------------------------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------|--------------|-------------------------------------|
| Other information:                                                                                          |                                  | Check if this is community property (see instructions)                                                                                                     | \$                                                                                | 3,000.00                             | \$           | 3,000.00                            |
| Make:  Model:  Year:  Approximate Mileage:                                                                  | Yamaha V-Star Classic 2009 6,300 | Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only                                                  | Do not deduct<br>the amount of<br>Creditors Who<br>Current value<br>entire proper | any secured on Have Claims  e of the | laims on Sch | edule D:<br>Property<br>alue of the |
| Other information:                                                                                          |                                  | At least one of the debtors and another  Check if this is community property (see instructions)                                                            | \$                                                                                | 5,000.00                             | \$           | 5,000.00                            |
| Make:  Model:  Year:                                                                                        | Gmc Terrain 2014                 | Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only                                                                              | Do not deduct<br>the amount of<br>Creditors Who                                   | any secured of<br>Have Claims        | laims on Sch | edule D:<br>Property                |
| Approximate Mileage: Other information:                                                                     | 45,000                           | Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)                                | entire proper                                                                     | 15,000.00                            | portion yo   | 15,000.00                           |
| Examples: Boats, trailers, motors, personal No.  Yes. Describe  5. Add the dollar value of the portion yes. | onal watercraft, fishing         | creational vehicles, other vehicles, and accessories vessels, snowmobiles, motorcycle accessories  our entries fro Part 2, including any entries for pages |                                                                                   |                                      |              | \$ 23,000.00                        |
| Describe Your Personal and Do you own or have any legal or equit                                            |                                  | of the following items?                                                                                                                                    |                                                                                   | ро                                   | rrent value  |                                     |

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions

O6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No.

Yes. Describe.....

Furniture, linens, small appliances, table & chairs, bedroom set

\$10,000.00

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| 07.                                                                                                                                                                                                          | Electronics                          | •                              |                                                                                                                                            |         |          |             |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|---------|----------|-------------|--|--|--|
| Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No. |                                      |                                |                                                                                                                                            |         |          |             |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       | Flat screen TV, computer, printer, music collection, cell phone \$5,000                                                                    |         | \$       | 5,000.00    |  |  |  |
| 08.                                                                                                                                                                                                          |                                      | Antiques and figuri            | nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles |         | ·        |             |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       | Memorabilia \$1,500                                                                                                                        |         | \$       | 1,500.00    |  |  |  |
| 09.                                                                                                                                                                                                          | Examples:                            |                                | hobbies  iic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes nusical instruments                     | 1       |          |             |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       | Tools \$30,000                                                                                                                             |         | \$       | 30,000.00   |  |  |  |
| 10.                                                                                                                                                                                                          | Firearms Examples: I                 | Pistols, rifles, shoto         | guns, ammunition, and related equipment                                                                                                    | 1       |          |             |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       |                                                                                                                                            |         | \$       | 0.00        |  |  |  |
| 11.                                                                                                                                                                                                          | Examples: I                          | Everyday clothes, t            | furs, leather coats, designer wear, shoes, accessories                                                                                     |         |          |             |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       | Clothes \$500                                                                                                                              |         | \$       | 500.00      |  |  |  |
| 12.                                                                                                                                                                                                          | Jewelry Examples: I gold, silver No. | Everyday jewelry, (            | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,                                                         | I       | <u> </u> |             |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       | Jewelry \$5,000                                                                                                                            |         | •        | 5,000.00    |  |  |  |
| 13.                                                                                                                                                                                                          | Non-farm a Examples: I               | nimals<br>Dogs, cats, birds, h | norses                                                                                                                                     |         | Ψ        | <u> </u>    |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       | Dogs \$0                                                                                                                                   |         | \$       | 0.00        |  |  |  |
| 14.                                                                                                                                                                                                          | Any other p                          | personal and ho                | usehold items you did not already list, including any health aids you did not list                                                         |         | •        |             |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       |                                                                                                                                            |         | \$       | 0.00        |  |  |  |
|                                                                                                                                                                                                              |                                      |                                | of your entries from Part 3, including any entries for pages you have attached er here                                                     |         |          | \$52,000.00 |  |  |  |
| P                                                                                                                                                                                                            | art 4:                               | escribe Your Fin               | ancial Assets                                                                                                                              |         |          |             |  |  |  |
|                                                                                                                                                                                                              |                                      | have any legal                 | or equitable interest in any of the following?                                                                                             | portion |          |             |  |  |  |
| 16.                                                                                                                                                                                                          | Examples: I                          | Money you have in              | your wallet, in your home, in a safe deposit box, and on hand when you file your petition                                                  |         |          |             |  |  |  |
|                                                                                                                                                                                                              | Yes.                                 | Describe                       |                                                                                                                                            |         | \$       | 0.00        |  |  |  |

Debtor 1

Ronald

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Desc Main

First Name Middle Name

| _Stewar   | t 🗀 |     |
|-----------|-----|-----|
| Docu      | me  | ent |
| Last Name |     |     |

| 17. | Deposits of | f money            |                                                                       |                     |                                                                          |            |          |   |
|-----|-------------|--------------------|-----------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------|------------|----------|---|
|     |             |                    | s, or other financial accounts; co<br>If you have multiple accounts w |                     | posit; shares in credit unions, brokerage houses, nstitution, list each. |            |          |   |
|     | Yes.        | Describe           | Account Type: Checking Account                                        | Insti               | tution name:<br>Chase                                                    | \$         | 1,100.00 | 0 |
|     |             |                    | Savings Account                                                       |                     | Chase                                                                    |            | 3,000.00 | • |
|     |             |                    | oarmigo / toocam                                                      |                     |                                                                          |            | 4,100.0  | - |
| 18. |             | -                  | publicly traded stocks<br>tment accounts with brokerage               | firms, money r      | market accounts                                                          | Ψ_         | 4,100.0  |   |
|     | Yes.        | Describe           | Institution or issuer name:                                           |                     |                                                                          |            |          |   |
| 19. | Non-public  | ly traded stock    | and interests in incorpora                                            | ated and uni        | ncorporated businesses, including an interest in                         | \$_        | 0.0      | D |
|     | Yes.        | Describe           | Name of Entity and Perce                                              | nt of Owners        | hip:                                                                     |            |          |   |
|     | _           |                    | •                                                                     |                     |                                                                          | \$_        | 0.0      | 0 |
| 20. | Governme    | nt and corporat    | e bonds and other negotia                                             | able and non        | n-negotiable instruments                                                 |            |          |   |
|     | •           |                    | le personal checks, cashiers' cl<br>ire those you cannot transfer to  |                     |                                                                          |            |          |   |
|     | Yes.        | Describe           | Issuer name:                                                          |                     |                                                                          |            |          |   |
|     |             |                    |                                                                       |                     |                                                                          | \$_        | 0.0      | 0 |
| 21. |             | or pension ac      |                                                                       |                     |                                                                          |            |          |   |
|     | No.         |                    |                                                                       |                     | counts, or other pension or profit-sharing plans                         |            |          |   |
|     | Yes.        | Describe           | Type of account and Instit<br>Pension plan                            | ution name:         | Union Local 701                                                          | ¢          | 0.0      | n |
|     |             |                    | i cholori piari                                                       |                     | Official Educative a                                                     |            | 0.0      | • |
|     | Your share  |                    | osits you have made so that yo                                        | tilities (electric, | e service or use from a company<br>, gas, water), telecommunications     | \$         | 0.00     | 0 |
| 23. | Annuities ( | A contract for a   | a periodic payment of mor                                             | ney to you, e       | ither for life or for a number of years)                                 | <b>*</b> _ |          |   |
|     | Yes.        | Describe           | Issuer name and descripti                                             | on:                 |                                                                          |            |          |   |
| 24. |             |                    | IRA, in an account in a qua(b), and 529(b)(1).                        | alified ABLE        | program, or under a qualified state tuition program.                     | \$_        | 0.0      | D |
|     | Yes.        | Describe           | Institution name and desc                                             | ription. Sepai      | rately file the records of any interests.11 U.S.C. § 521(c):             |            |          |   |
| 25. | Trusts, equ | uitable or future  | interests in property (oth                                            | er than anytl       | hing listed in line 1), and rights or powers                             | \$_        | 0.0      | D |
|     | Yes.        | Describe           |                                                                       |                     |                                                                          |            |          |   |
| 26. | -           |                    | marks, trade secrets, and                                             |                     | • • •                                                                    | \$_        | 0.0      | 0 |
|     |             | Internet domain na | ames, websites, proceeds from                                         | royalties and li    | icensing agreements                                                      |            |          |   |
|     | No. Yes.    | Describe           |                                                                       |                     |                                                                          |            | 0.0      | ^ |
| 27  | Licenses f  | ranchises and      | other general intangibles                                             |                     |                                                                          | \$_        | 0.0      | ٠ |
| -1. |             |                    | -                                                                     | association hol     | ldings, liquor licenses, professional licenses                           |            |          |   |
|     | Yes.        | Describe           |                                                                       |                     |                                                                          | \$_        | 0.0      | 0 |

Case 16-25901 Ronald Debtor 1

Doc 1

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Desc Main

First Name Middle Name

| Mon | ey or prope                | erty owed to you | 1?                                                                                                                                                  | Current value of the portion you own? Do not deduct secured claims or exemptions  |
|-----|----------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| 28. | Tax refunds No. Yes.       | Describe         |                                                                                                                                                     | \$ 0.00                                                                           |
| 29. | Examples: For No.  Yes.    | -                | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement                                                    | , <u> </u>                                                                        |
| 30. | Examples: U<br>Social Secu |                  | wes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, d loans you made to someone else            | \$ <u>0.0</u> 0                                                                   |
| 31. | No. Yes.                   | Describe         | es                                                                                                                                                  | \$ <u>0.0</u> 0                                                                   |
|     | Examples: Ho.              | -                | r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  Company Name & Beneficiary:  Term life \$0              |                                                                                   |
| 32. | If you are th              |                  | at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive s died.     | \$ <u>0.0</u> 0                                                                   |
| 33. | Yes.                       | -                | s, whether or not you have filed a lawsuit or made a demand for payment nent disputes, insurance claims, or rights to sue                           | \$ <u>0.0</u> 0                                                                   |
|     | No. Yes.                   | Describe         | Worker's Compensation Claim against Rush Truck Centers for injuries including but not limited to shoulder tear occuring 12/2015.                    | \$ 0.00                                                                           |
| 34. | Other conti                | ngent and unlice | uidated claims of every nature, including counterclaims of the debtor and rights                                                                    | \$ <u>0.0</u> 0                                                                   |
| 35. | _                          |                  | id not already list                                                                                                                                 | \$0.00                                                                            |
|     | Yes.                       | Describe         |                                                                                                                                                     | \$0.00                                                                            |
|     | or Part 4. W               | /rite that numbe | of your entries from Part 4, including any entries for pages you have attached er here>                                                             | \$4,100.00                                                                        |
|     |                            |                  | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1.  gal or equitable interest in any business-related property? |                                                                                   |
|     | -                          |                  |                                                                                                                                                     | Current value of the portion you own?  Do not deduct secured claims or exemptions |
| 38. | Accounts r No. Yes.        | eceivable or co  | mmissions you already earned                                                                                                                        |                                                                                   |
|     |                            |                  |                                                                                                                                                     | \$ <u>0.0</u> 0                                                                   |

Case 16-25901 Doc 1 Ronald

Filed 08/12/16 Document Entered 08/12/16 09:19:10 Page 15 of \$8 umber (if known) Desc Main First Name Middle Name

| 39.                             | . Office equipment, furnishings, and supplies                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                              |
|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
|                                 | Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  No.                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                              |
|                                 | Yes. Describe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$ 0.00                                      |
| 40.                             | . Machinery, fixtures, equipment, supplies you use in business, and tools of your trade                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                              |
|                                 | No.  Yes. Describe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                              |
|                                 | Tes. Describe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$0.00                                       |
| 41.                             | . Inventory                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                              |
|                                 | No.  Yes. Describe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                              |
|                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | \$0.00                                       |
| 42.                             | No. Name of Entity and Percent of Ownership:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                              |
|                                 | Yes. Describe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                              |
| 12                              | . Customer lists, mailing lists, or other compilations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$0.00                                       |
| 43.                             | No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                              |
|                                 | Yes. Describe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                              |
| 44.                             | . Any business-related property you did not already list                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$ <u>0.0</u> 0                              |
|                                 | No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                              |
|                                 | Yes. Describe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$ 0.00                                      |
|                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | \$0.0                                        |
|                                 | Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$ 0.00                                      |
|                                 | for Part 5. Write that number here>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | \$ 0.00                                      |
|                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                              |
|                                 | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                              |
|                                 | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                              |
|                                 | If you own or have an interest in farmland, list it in Part 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                              |
|                                 | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?                                                                                                                                                                                                                                                                                                                                                                                                                                       | \$ 0.00                                      |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.                                                                                                                                                                                                                                                                                                                                                                                                                                  | \$0.00                                       |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish                                                                                                                                                                                                                                                                                                                                                     | \$ <u>0.0</u> 0                              |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals                                                                                                                                                                                                                                                                                                                                                                                                     | \$0.00                                       |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe                                                                                                                                                                                                                                                                                                                                 | \$\$\$\$                                     |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.                                                                                                                                                                                                                                                                                                                                                | <u>,                                    </u> |
| 46.                             | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested                                                                                                                                                                                                                                                                                              | \$ <u>0.0</u> 0                              |
| 46.<br>47.                      | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe                                                                                                                                                                                                                                                                          | <u>,                                    </u> |
| 46.<br>47.                      | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.                                                                                                                                                                                                                                                                                         | \$ <u>0.0</u> 0                              |
| 46.<br>47.                      | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade                                                                                                                                                                                         | \$\$<br>\$0.00                               |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.                                                                                                                                                                                    | \$ <u>0.0</u> 0                              |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.                                                                                                                | \$\$<br>\$0.00                               |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed                                                                                                                     | \$\$<br>\$0.00                               |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.                                                                                                                | \$\$<br>\$0.00<br>\$0                        |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  Any farm- and commercial fishing-related property you did not already list  No.                | \$\$<br>\$0.00<br>\$0                        |
| 46.<br>47.<br>48.               | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  Crops—either growing or harvested  No. Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No. Yes. Describe  Farm and fishing supplies, chemicals, and feed  No. Yes. Describe  Farm and fishing supplies, chemicals, and feed  No. Yes. Describe                                    | \$\$<br>\$0.00<br>\$0                        |
| 46.<br>47.<br>48.<br>49.        | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  Any farm- and commercial fishing-related property you did not already list  No.  Yes. Describe | \$\$<br>\$0.00<br>\$\$                       |
| 46.<br>47.<br>48.<br>49.<br>50. | If you own or have an interest in farmland, list it in Part 1.  Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  Crops—either growing or harvested  No.  Yes. Describe  Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  Any farm- and commercial fishing-related property you did not already list  No.                | \$\$<br>\$0.00<br>\$\$                       |

0.00

\$0.00

\$166,012.00

Filed 08/12/16 Entered 08/12/16 09:19:10

Stewart Page 16 of Bumber (if known)

Page 16 of Bumber (if known) Case 16-25901 Desc Main Doc 1 Ronald First Name Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Yes. Describe..... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... -->

| Part 8: List the Totals of Each Part of this Form             |              |              |
|---------------------------------------------------------------|--------------|--------------|
| 55. Part 1: Total real estate, line 2                         |              | \$ 86,912.00 |
| 56. Part 2: Total vehicles, line 5                            | \$ 23,000.00 |              |
| 57. Part 3: Total personal and household items, line 15       | \$ 52,000.00 |              |
| 58. Part 4: Total financial assets, line 36                   | \$ 4,100.00  |              |
| 59. Part 5: Total business-related property, line 45          | \$ 0.00      |              |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$ 0.00      |              |
| 61. Part 7: Total other property not listed, line 54          | \$ 0.00      |              |
| 62. Total personal property. Add lines 56 through 61          | \$ 79,100.00 | \$ 79,100.00 |
|                                                               |              |              |

63. Total of all property on Schedule A/B. Add line 55 + line 62

Record # 715366 Official Form 106A/B Page 7 of 7 Schedule A/B: Property

Case 16-25901 Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main

| Fill in this information to identify your case: |                        |                                   |                  |  |  |  |  |
|-------------------------------------------------|------------------------|-----------------------------------|------------------|--|--|--|--|
| Debtor 1                                        | Ronald                 | John                              | Stewart          |  |  |  |  |
|                                                 | First Name             | Middle Name                       | Last Name        |  |  |  |  |
| Debtor 2                                        |                        |                                   |                  |  |  |  |  |
| (Spouse, if filing)                             | First Name             | Middle Name                       | Last Name        |  |  |  |  |
| United States                                   | Bankruptcy Court for t | he: <u>NORTHERN</u> District of _ | ILLINOIS (State) |  |  |  |  |
| Case Number                                     | г                      |                                   |                  |  |  |  |  |
| (If known)                                      |                        |                                   |                  |  |  |  |  |

## Official Form 106C

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|                                                                                             | emptions are you claiming? Check                                 |                                      | ouse is filing with you.                                        |                                    |  |  |  |  |  |  |
|---------------------------------------------------------------------------------------------|------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------|------------------------------------|--|--|--|--|--|--|
| You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3)         |                                                                  |                                      |                                                                 |                                    |  |  |  |  |  |  |
| You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)                                  |                                                                  |                                      |                                                                 |                                    |  |  |  |  |  |  |
| 2. For any propert                                                                          | y you list on <i>Schedule A/B</i> that yo                        | u claim as exempt, fill in t         | the information below.                                          |                                    |  |  |  |  |  |  |
| •                                                                                           | on of the property and line on<br>hat lists this property        | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |  |  |  |  |
|                                                                                             |                                                                  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |  |  |  |  |  |  |
| Brief description:                                                                          | Furniture, linens, small appliances, table & chairs, bedroom set | \$_10,000                            | \$ _ 2,000                                                      | 735 ILCS 5/12-1001(b) - \$2,000.00 |  |  |  |  |  |  |
| Line from Schedule A/B:                                                                     | 06                                                               |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |  |
| Brief<br>description:                                                                       | Flat screen TV, computer, printer, music collection, cell phone  | \$_5,000                             | \$1,000                                                         | 735 ILCS 5/12-1001(b) - \$1,000.00 |  |  |  |  |  |  |
| Line from Schedule A/B:                                                                     | 07                                                               |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |  |
| Brief<br>description:                                                                       | Clothes                                                          | \$_500                               | <b></b>                                                         | 735 ILCS 5/12-1001(a),(e) - \$0.00 |  |  |  |  |  |  |
| Line from Schedule A/B:                                                                     | 11                                                               |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |  |
| Brief<br>description:                                                                       | Jewelry                                                          | \$ 5,000                             | <b></b> \$                                                      | 735 ILCS 5/12-1001(a),(e) - \$0.00 |  |  |  |  |  |  |
| Line from Schedule A/B:                                                                     | 12                                                               |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |  |
|                                                                                             |                                                                  |                                      |                                                                 |                                    |  |  |  |  |  |  |
| Official Form 106C Record # 715366 Schedule C: The Property You Claim as Exempt Page 1 of 2 |                                                                  |                                      |                                                                 |                                    |  |  |  |  |  |  |

Case 16-25901 Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main

Debtor 1 Ronald John Document Page 18 of 58 Number (if known)

Last Name

Middle Name

|    | Part 2: Additional Page                                                             |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|----|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------|------------------------------------|-----------------------------------------------------------------|--------------------------|-------------|--|--|--|
|    | Brief description of the property and line on Schedule A/B that lists this property |                                                                               |                   | urrent value of the ortion you own | Amount of the exemption you claim                               | Specific laws that allow | exemption   |  |  |  |
|    |                                                                                     |                                                                               |                   | copy the value from chedule A/B    | Check only one box for each exemption                           |                          |             |  |  |  |
|    | Brief description:                                                                  | Worker's Compensation<br>against Rush Truck Cen<br>injuries including but not | iters for \$      | Unknown                            | \$                                                              | 820 ILCS 305/21 - \$0.00 |             |  |  |  |
|    | Line from Schedule A/B:                                                             | shoulder tear occuring 1                                                      |                   |                                    | 100% of fair market value, up to any applicable statutory limit |                          |             |  |  |  |
| 3. | Are you claimin                                                                     | g a homestead exemp                                                           | tion of more than | \$155,675?                         |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    | or after the date of adjustment .)                              |                          |             |  |  |  |
|    | No.                                                                                 |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    | Yes. Did you                                                                        | acquire the property c                                                        | overed by the exe | mption within 1,215 day            | ys before you filed this case?                                  |                          |             |  |  |  |
|    | ☐ No                                                                                |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    | Yes.                                                                                |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
|    |                                                                                     |                                                                               |                   |                                    |                                                                 |                          |             |  |  |  |
| 0  | fficial Form 1060                                                                   | Record #                                                                      | 715366            | Schodulo C: The                    | Property You Claim as Evennt                                    |                          | Page 2 of 2 |  |  |  |

| ======================================= | Caso 16                               |                                             | c 1 Filad 09/12/16                                                                | Entered 08/12/1                | 6 09:19:10                                             | Desc Main                                          |                                |
|-----------------------------------------|---------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------|--------------------------------------------------------|----------------------------------------------------|--------------------------------|
| Fill in this in                         | formation to iden                     | tify your case:                             |                                                                                   | 9 of 58                        |                                                        |                                                    |                                |
| Debtor 1                                | Ronald                                | John                                        | Stewart                                                                           |                                |                                                        |                                                    |                                |
|                                         | First Name                            | Middle Name                                 | Last Name                                                                         |                                |                                                        |                                                    |                                |
| Debtor 2<br>(Spouse, if filing)         | First Name                            | Middle Name                                 | Last Name                                                                         |                                |                                                        |                                                    |                                |
| United States                           | Bankruptcy Court for                  | r the : <u>NORTHERN</u>                     | District of <u>ILLINOIS</u>                                                       |                                |                                                        |                                                    |                                |
| Case Number                             |                                       |                                             | (State)                                                                           |                                |                                                        | Check if this                                      | s is an                        |
| (If known)                              | · · · · · · · · · · · · · · · · · · · |                                             |                                                                                   |                                |                                                        | amended fil                                        | ling                           |
| Official F                              | orm 106D                              |                                             |                                                                                   |                                |                                                        |                                                    |                                |
|                                         |                                       | rs Who Have                                 | Claims Secured by F                                                               | ronerty                        |                                                        |                                                    | 12/1                           |
| Be as complete                          | and accurate as<br>more space is nee  | possible. If two marr                       | ried people are filing together, both<br>ional Page, fill it out, number the er   | are equally responsible for    |                                                        | ny                                                 |                                |
|                                         | •                                     | e and case number (<br>s secured by your pr | `                                                                                 |                                |                                                        |                                                    |                                |
| _                                       |                                       |                                             | e court with your other schedules. Yo                                             | uu have nothing else to renort | on this form                                           |                                                    |                                |
| _                                       | Il in all of the inform               |                                             | , court with your other somedules. To                                             | a nave nothing cloc to report  | on this form.                                          |                                                    |                                |
| 163.11                                  |                                       | nation below.                               |                                                                                   |                                |                                                        |                                                    |                                |
| Part 1:                                 | List All Secured Cla                  | aims                                        |                                                                                   |                                |                                                        | _                                                  | _                              |
| 2. List all se                          | cured claims. If a                    | creditor has more tha                       | an one secured claim, list the creditor                                           | r separately                   | Column A                                               | Column A                                           | Column C                       |
| for each c                              | laim. If more than                    | one creditor has a pa                       | articular claim, list the other creditors all order according to the creditors na | in Part 2.                     | Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured<br>portion<br>If any |
| 2.1 ALLY F                              | inancial                              |                                             | Describe the property that secure                                                 | s the claim:                   | \$_23,841.00                                           | \$ <u>15,000.00</u>                                | \$ <u>8,841.00</u>             |
| Creditor's                              |                                       |                                             | 2014 Gmc Terrain with over 45,0                                                   | 000 miles                      | 7                                                      |                                                    |                                |
| 200 Re                                  | naissance Ctr<br>Street               |                                             |                                                                                   |                                |                                                        |                                                    |                                |
| Number                                  | Sileet                                |                                             | As of the date you file, the claim i                                              | is: Check all that apply       | _                                                      |                                                    |                                |
|                                         |                                       |                                             | Contingent                                                                        | S. Check all that apply.       |                                                        |                                                    |                                |
| Detroit                                 |                                       | MI 48243<br>State Zip Code                  | Unliquidated                                                                      |                                |                                                        |                                                    |                                |
| •                                       |                                       |                                             | Disputed                                                                          |                                |                                                        |                                                    |                                |
| Who owes                                | the debt? Check or                    | ne.                                         | Nature of Lien. Check all that apply  An agreement you made (such as              |                                |                                                        |                                                    |                                |
| Debtor                                  | •                                     |                                             | car loan)                                                                         | s mortgage or secured          |                                                        |                                                    |                                |
| Debtor                                  | 1 and Debtor 2 only                   |                                             | Statutory lien (such as tax lien, m                                               | echanic's lien)                |                                                        |                                                    |                                |
| At least                                | t one of the debtors a                | nd another                                  | Judgment lien from a lawsuit                                                      |                                |                                                        |                                                    |                                |
| Check                                   | if this claim relates                 | s to a                                      | Other (including a right to offset)                                               |                                |                                                        |                                                    |                                |
|                                         | unity debt<br>was incurred            | 2014-04-12                                  | Last 4 digits of account number                                                   | 5376                           |                                                        |                                                    |                                |
| 2.0                                     |                                       | <u> </u>                                    | Describe the property that secure                                                 |                                | <b>\$</b> 114,587.00                                   | <b>\$</b> 173,824.00                               | <b>\$</b> 0.00                 |
| Creditor's                              | argo HM Mortgag                       |                                             | 510 Montrose Dr Romeoville IL 6                                                   |                                | 7                                                      | •                                                  | •                              |
| 8480 S                                  | tagecoach Cir                         |                                             | Residence                                                                         | 70 1 10 1 1 milary             |                                                        |                                                    |                                |
| Number                                  | Street                                |                                             |                                                                                   |                                |                                                        |                                                    |                                |
|                                         |                                       | <del></del>                                 | As of the date you file, the claim in Contingent                                  | s: Check all that apply.       |                                                        |                                                    |                                |
| Frederi                                 | ck                                    | MD 21701                                    | Unliquidated                                                                      |                                |                                                        |                                                    |                                |
| City                                    |                                       | State Zip Code                              | Disputed                                                                          |                                |                                                        |                                                    |                                |
| Who owes                                | s the debt? Check or                  | ne.                                         | Nature of Lien. Check all that apply                                              | <i>t</i> .                     |                                                        |                                                    |                                |
| Debtor                                  | -                                     |                                             | An agreement you made (such as                                                    | s mortgage or secured          |                                                        |                                                    |                                |
| Debtor                                  | 2 only<br>1 and Debtor 2 only         |                                             | car loan)  Statutory lien (such as tax lien, m                                    | echanic's lien)                |                                                        |                                                    |                                |
| =                                       | t one of the debtors a                | nd another                                  | Judgment lien from a lawsuit                                                      | <i></i> ,                      |                                                        |                                                    |                                |
| □ Chack                                 | if this claim relates                 | s to a                                      | Other (including a right to offset)                                               |                                |                                                        |                                                    |                                |
|                                         | unity debt                            |                                             |                                                                                   | 0.406                          |                                                        |                                                    |                                |
|                                         | was incurred                          | 2011-2016                                   | Last 4 digits of account number                                                   |                                |                                                        |                                                    |                                |
| Add the c                               | tollar value of you                   | r entries in Column                         | A on this page. Write that number                                                 | here:                          | \$ <u>138,428.00</u>                                   |                                                    |                                |

| F:III                                      | in this inf                                                      | Caso 16 25001                                                                                             |                                                                                          | Filad 09/12/16                                                                                                                  | Entered 08/12/16 09:19:10                                                                                                                                                                                                           | Desc Main                      |          |
|--------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------|
| FIII                                       | in uns ini                                                       | formation to identify your cas                                                                            | e.                                                                                       |                                                                                                                                 | 0 of 58                                                                                                                                                                                                                             |                                |          |
| De                                         | btor 1                                                           | Ronald                                                                                                    | John                                                                                     | Stewart                                                                                                                         |                                                                                                                                                                                                                                     |                                |          |
|                                            |                                                                  | First Name M                                                                                              | fiddle Name                                                                              | Last Name                                                                                                                       |                                                                                                                                                                                                                                     |                                |          |
|                                            | btor 2                                                           |                                                                                                           |                                                                                          |                                                                                                                                 |                                                                                                                                                                                                                                     |                                |          |
| (Spo                                       | ouse, if filing)                                                 | First Name M                                                                                              | Aiddle Name                                                                              | Last Name                                                                                                                       |                                                                                                                                                                                                                                     |                                |          |
| Un                                         | ited States I                                                    | Bankruptcy Court for the : <u>NORT</u>                                                                    | THERN District                                                                           | t of <u>ILLINOIS</u><br>(State)                                                                                                 |                                                                                                                                                                                                                                     | _                              |          |
|                                            | se Number                                                        |                                                                                                           |                                                                                          | (State)                                                                                                                         |                                                                                                                                                                                                                                     | Check if this is               | an       |
| (If                                        | known)                                                           |                                                                                                           |                                                                                          |                                                                                                                                 |                                                                                                                                                                                                                                     | amended filing                 |          |
| Offi                                       | <u>cial Fo</u>                                                   | orm 106E/F                                                                                                |                                                                                          |                                                                                                                                 |                                                                                                                                                                                                                                     |                                |          |
| Sch                                        | edule                                                            | E/F: Creditors Who                                                                                        | o Have U                                                                                 | Insecured Claims                                                                                                                |                                                                                                                                                                                                                                     |                                | 12/15    |
| ist th<br>/B: P<br>redito<br>eede<br>op of | e other pa<br>Property (Cors with pa<br>d, copy th<br>any additi | arty to any executory contract<br>Official Form 106A/B) and on S<br>artially secured claims that ar       | ts or unexpired<br>Schedule G: E.<br>re listed in Sch<br>mber the entri-<br>and case num | d leases that could result in a<br>executory Contracts and Une<br>nedule D: Creditors Who Hav<br>es in the boxes on the left. A | s and Part 2 for creditors with NONPRIORITY a claim. Also list executory contracts on Sche xpired Leases (Official Form 106G). Do not in the Claims Secured by Property. If more space ttach the Continuation Page to this page. On | edule<br>clude any<br>is       |          |
|                                            |                                                                  | litors have priority unsecured                                                                            | l claims agains                                                                          | st vou?                                                                                                                         |                                                                                                                                                                                                                                     |                                |          |
|                                            | _                                                                | to Part 2.                                                                                                | z ciumis ugum                                                                            | ot you.                                                                                                                         |                                                                                                                                                                                                                                     |                                |          |
| -                                          | Yes.                                                             | to Part 2.                                                                                                |                                                                                          |                                                                                                                                 |                                                                                                                                                                                                                                     |                                |          |
|                                            |                                                                  | our priority unsecured claims                                                                             | . If a creditor h                                                                        | as more than one priority unse                                                                                                  | ecured claim, list the creditor separately for eac                                                                                                                                                                                  | h claim. For                   |          |
| ea<br>no<br>ui                             | ach claim I<br>onpriority a<br>nsecured o                        | listed, identify what type of clain<br>amounts. As much as possible,<br>claims, fill out the Continuation | m it is. If a clair<br>, list the claims<br>Page of Part 1                               | m has both priority and nonpri<br>in alphabetical order accordir<br>. If more than one creditor hol                             | ority amounts, list that claim here and show bot<br>ng to the creditor's name. If you have more than<br>lds a particular claim, list the other creditors in F                                                                       | h priority and<br>two priority |          |
| (F                                         | or an expl                                                       | lanation of each type of claim,                                                                           | see the instruc                                                                          | ctions for this form in the instru                                                                                              | rotal claim                                                                                                                                                                                                                         | Priority Nonp                  | oriority |
|                                            |                                                                  |                                                                                                           |                                                                                          |                                                                                                                                 |                                                                                                                                                                                                                                     | amount amou                    | -        |
| Par                                        | rt 2:                                                            | ist All of Your NONPRIORITY U                                                                             | nsecured Claim                                                                           | 15                                                                                                                              |                                                                                                                                                                                                                                     |                                |          |
| 3. <b>D</b>                                | o any cred                                                       | litors have nonpriority unsecu                                                                            | ured claims ag                                                                           | gainst you?                                                                                                                     |                                                                                                                                                                                                                                     |                                |          |
|                                            | No. You                                                          | u have nothing to report in this                                                                          | part. Submit tl                                                                          | his form to the court with your                                                                                                 | other schedules.                                                                                                                                                                                                                    |                                |          |
|                                            | Yes.                                                             |                                                                                                           |                                                                                          |                                                                                                                                 |                                                                                                                                                                                                                                     |                                |          |
| no<br>in                                   | onpriority u                                                     | unsecured claim, list the credito                                                                         | or separately for<br>or holds a partic                                                   | or each claim. For each claim l                                                                                                 | or who holds each claim. If a creditor has more<br>listed, identify what type of claim it is. Do not list<br>tors in Part 3.If you have more than three nonpr                                                                       | t claims already               |          |
| CI                                         | airis iii ou                                                     | it the Continuation Fage of Fai                                                                           | 11 2.                                                                                    |                                                                                                                                 |                                                                                                                                                                                                                                     | Total                          | claim    |
| 4.1                                        | l ———                                                            | ONE BANK USA N                                                                                            | La:                                                                                      | st 4 digits of account number                                                                                                   | NULL                                                                                                                                                                                                                                | \$ <u>668</u>                  | 3.00     |
|                                            | Creditor's N<br>15000 C                                          | Name<br>Capital One Dr                                                                                    | Wh                                                                                       | nen was the debt incurred?                                                                                                      | 2011-2015                                                                                                                                                                                                                           |                                |          |
|                                            | Number                                                           | Street                                                                                                    |                                                                                          |                                                                                                                                 |                                                                                                                                                                                                                                     |                                |          |
|                                            |                                                                  |                                                                                                           | As                                                                                       | of the date you file, the claim                                                                                                 | is: Check all that apply.                                                                                                                                                                                                           |                                |          |
|                                            | Richmor                                                          | nd VA 2323                                                                                                | 38 📙                                                                                     | Contingent                                                                                                                      |                                                                                                                                                                                                                                     |                                |          |
|                                            | City                                                             | State Zip Co                                                                                              |                                                                                          | Unliquidated                                                                                                                    |                                                                                                                                                                                                                                     |                                |          |
| '                                          |                                                                  | the debt? Check one.                                                                                      | Ц                                                                                        | Disputed                                                                                                                        |                                                                                                                                                                                                                                     |                                |          |
|                                            | Debtor 1 Debtor 2                                                | •                                                                                                         | Tve                                                                                      | pe of NONPRIORITY unsecured                                                                                                     | d claim:                                                                                                                                                                                                                            |                                |          |
|                                            | =                                                                | and Debtor 2 only                                                                                         | ıy<br>                                                                                   | Student loans                                                                                                                   | a ciann.                                                                                                                                                                                                                            |                                |          |
|                                            | =                                                                | one of the debtors and another                                                                            | Ī                                                                                        | Obligations arising out of a separ                                                                                              | ration agreement or divorce                                                                                                                                                                                                         |                                |          |
|                                            | =                                                                | if this claim relates to a                                                                                | _                                                                                        | that you did not report as priority                                                                                             | claims                                                                                                                                                                                                                              |                                |          |
|                                            | commu                                                            | nity debt                                                                                                 |                                                                                          | Debts to pension or profit-sharing                                                                                              | plans, and other similar debts                                                                                                                                                                                                      |                                |          |
|                                            | No                                                               | n subject to offest?                                                                                      | _                                                                                        | Other, Specify Credit Card o                                                                                                    | or Cradit Llag                                                                                                                                                                                                                      |                                |          |
|                                            | INC)                                                             |                                                                                                           |                                                                                          | Other. Specify Credit Card o                                                                                                    |                                                                                                                                                                                                                                     |                                |          |

Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main Case 16-25901 Doc 1 Page 21 of 58 Case Number (if known) **Decument** Ronald John Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.2      | Capital ONE N.A.                        | Last 4 digits of account number 3676                              | \$ <u>2,087.00</u> |
|----------|-----------------------------------------|-------------------------------------------------------------------|--------------------|
|          | Creditor's Name                         | 2015 2010                                                         |                    |
|          | 1717 Central St                         | When was the debt incurred? 2015-2016                             |                    |
|          | Number Street                           |                                                                   |                    |
|          |                                         | As of the date you file, the claim is: Check all that apply.      |                    |
|          |                                         |                                                                   |                    |
|          | Evanston IL 60201                       | Contingent                                                        |                    |
|          | City State Zip Code                     | Unliquidated                                                      |                    |
| V        | Vho owes the debt? Check one.           | Disputed                                                          |                    |
| 1        | Debtor 1 only                           |                                                                   |                    |
| 1 7      | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:                              |                    |
|          | <b>=</b>                                | ri 🗂                                                              |                    |
|          | Debtor 1 and Debtor 2 only              | ☐ Student loans                                                   |                    |
|          | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce      |                    |
|          | Check if this claim relates to a        | that you did not report as priority claims                        |                    |
|          | community debt                          | Debts to pension or profit-sharing plans, and other similar debts |                    |
| <u> </u> | s the claim subject to offest?          |                                                                   |                    |
|          | No                                      | Other. Specify Collecting for Creditor                            |                    |
|          | Yes                                     | <del>-</del>                                                      |                    |
| 4.3      | CITI                                    | Last 4 digits of account numberNULL                               | <b>\$</b> 4,568.00 |
|          | Creditor's Name                         | 0040 0040                                                         |                    |
|          | Po Box 6241                             | When was the debt incurred? 2012-2016                             |                    |
|          | Number Street                           |                                                                   |                    |
|          |                                         | As of the date you file, the claim is: Check all that apply.      |                    |
|          |                                         |                                                                   |                    |
|          | Sioux Falls SD 57117                    | Contingent                                                        |                    |
|          | City State Zip Code                     | Unliquidated                                                      |                    |
| V        | Vho owes the debt? Check one.           | Disputed                                                          |                    |
|          | Debtor 1 only                           |                                                                   |                    |
| 1 7      | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:                              |                    |
| 1 8      | <b>=</b>                                | Student loans                                                     |                    |
|          | Debtor 1 and Debtor 2 only              |                                                                   |                    |
| 1 4      | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce      |                    |
| [        | Check if this claim relates to a        | that you did not report as priority claims                        |                    |
| 1 .      | community debt                          | Debts to pension or profit-sharing plans, and other similar debts |                    |
|          | s the claim subject to offest?          |                                                                   |                    |
|          | No                                      | Other. Specify Credit Card or Credit Use                          |                    |
|          | Yes                                     | AUU                                                               |                    |
| 4.4      | Discover FIN SVCS LLC                   | Last 4 digits of account number NULL                              | \$ <u>5,667.00</u> |
| 1        | Creditor's Name                         | 2012 2016                                                         |                    |
|          | Po Box 15316                            | When was the debt incurred? 2013-2016                             |                    |
|          | Number Street                           |                                                                   |                    |
|          |                                         | As of the date you file, the claim is: Check all that apply.      |                    |
| 1        |                                         | Contingent                                                        |                    |
| 1        | Wilmington DE 19850                     |                                                                   |                    |
|          | City State Zip Code                     | Unliquidated                                                      |                    |
| V        | Vho owes the debt? Check one.           | Disputed                                                          |                    |
|          | Debtor 1 only                           |                                                                   |                    |
| Ī        | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:                              |                    |
| ř        | Debtor 1 and Debtor 2 only              | Student loans                                                     |                    |
|          | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce      |                    |
|          |                                         |                                                                   |                    |
| L        | Check if this claim relates to a        | that you did not report as priority claims                        |                    |
|          | community debt                          | Debts to pension or profit-sharing plans, and other similar debts |                    |
|          | s the claim subject to offest?          | Occidit Occident Occidit Units                                    |                    |
|          | No                                      | Other. Specify Credit Card or Credit Use                          |                    |
|          | Yes                                     |                                                                   |                    |

Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main Case 16-25901 Page 22 of 58 Case Number (if known) Document Ronald Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** First Premier BANK \$ 846.00 Last 4 digits of account number \_ Creditor's Name 2010-2015 601 S Minnesota Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Sioux Falls SD 57104 Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes Merchants Credit Guide \$ 69.00 Last 4 digits of account number 4.6

Creditor's Name 2014-2015 223 W Jackson Blvd Ste 4 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60606 Chicago IL Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify Medical Debt Yes Triad Financial 0001 \$ 0.00 4.7 Last 4 digits of account number Creditor's Name 2007-11-24 5201 Rufe Snow Dr Ste 40 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent North Richland Hills 76180 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify \_

Record # 715366

Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main Case 16-25901

Page 23 of 58 Case Number (if known) **Decument** Ronald John Debtor 1

List Others to Be Notified for a Debt That You Already Listed

| 5. | Use this page only if you have others to be notified ab example, if a collection agency is trying to collect from 2, then list the collection agency here. Similarly, if you additional creditors here. If you do not have additional | you fo<br>have m | or a debt you on | owe to someone else, list the original creditor for any of the debts that you | creditor in Parts 1 or<br>listed in Parts 1 or 2, list the |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------|-------------------------------------------------------------------------------|------------------------------------------------------------|
|    | Will County Circuit Court                                                                                                                                                                                                             |                  |                  | On which entry in Part 1 or Part 2 lis                                        | st the original creditor?                                  |
|    | Name<br>14 W. Jefferson St                                                                                                                                                                                                            |                  |                  | Line 4 of (Check one):                                                        | Part 1: Creditors with Priority Unsecured Claims           |
|    | Number Street                                                                                                                                                                                                                         |                  |                  |                                                                               | Part 2: Creditors with Nonpriority Unsecured Claims        |
|    |                                                                                                                                                                                                                                       |                  |                  |                                                                               |                                                            |
|    | Joliet                                                                                                                                                                                                                                | IL 6             | 60432            | Last 4 digits of account number                                               | NULL                                                       |
|    | City State                                                                                                                                                                                                                            | Zip Cod          | de               |                                                                               |                                                            |
|    | Blitt and Gaines, PC                                                                                                                                                                                                                  |                  |                  | On which entry in Part 1 or Part 2 lis                                        | st the original creditor?                                  |
|    | Name<br>661 Glenn Ave.                                                                                                                                                                                                                |                  |                  | Line 4 of (Check one):                                                        | Part 1: Creditors with Priority Unsecured Claims           |
|    | Number Street                                                                                                                                                                                                                         |                  |                  |                                                                               | Part 2: Creditors with Nonpriority Unsecured Claims        |
|    |                                                                                                                                                                                                                                       |                  |                  |                                                                               |                                                            |
|    | Wheeling                                                                                                                                                                                                                              | L6               | 60090            | Last 4 digits of account number                                               | NULL                                                       |
| I  | City                                                                                                                                                                                                                                  | Zin Co           | de               |                                                                               |                                                            |

Case 16-25901 Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main Page 24 of 58 Case Number (if known)

**Document** Debtor 1 Ronald John

Add the Amounts for Each Type of Unsecured Claim

| 6. | Total the amounts of certain types of unsecured claims. | This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|----|---------------------------------------------------------|-------------------------------------------------------------------------------|
|    | Add the amounts for each type of unsecured claim.       |                                                                               |
|    |                                                         |                                                                               |
|    |                                                         |                                                                               |

|                             |                                                                                                                                                                                                  |            | Total claim  |      |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------|------|
| Total claims                | 6a. Domestic support obligations                                                                                                                                                                 | 6a.        | \$           | 0.00 |
|                             | 6b. Taxes and Certain other debts you owe the government                                                                                                                                         | 6b.        | \$           | 0.00 |
|                             | 6c. Claims for death or personal injury while you were intoxicated                                                                                                                               | 6c.        | \$           | 0.00 |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                                                                                                               | 6d.        | \$           | 0.00 |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.                                                                                                                                                       | 6e.        | \$           | 0.00 |
|                             |                                                                                                                                                                                                  |            | Total claim  |      |
|                             |                                                                                                                                                                                                  |            |              |      |
| Total claims<br>from Part 2 | 6f. Student loans                                                                                                                                                                                | 6f.        | \$           | 0.00 |
| Total claims<br>from Part 2 | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims                                                                   | 6f.<br>6g. | \$<br>\$     | 0.00 |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority                                                                                             |            | \$\$<br>\$\$ |      |
|                             | <ul> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other</li> </ul> | 6g.        |              | 0.00 |

| Fil                         | l in this in                                                             | Caso 16<br>formation to iden                                                                                             |                                                                                                                                                                                | Filod 09/12/16                                                                                                                | Entered 08/12/16 09:19:10<br>5 of 58                                                                                                                                                                                                                                                                          | Desc Main                          |
|-----------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| De                          | ebtor 1                                                                  | Ronald                                                                                                                   | John                                                                                                                                                                           | Stewart                                                                                                                       |                                                                                                                                                                                                                                                                                                               |                                    |
| 50                          | 35101 1                                                                  | First Name                                                                                                               | Middle Name                                                                                                                                                                    | Last Name                                                                                                                     |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | ebtor 2<br>couse, if filing)                                             | First Name                                                                                                               | Middle Name                                                                                                                                                                    | Last Name                                                                                                                     |                                                                                                                                                                                                                                                                                                               |                                    |
| Ur                          | nited States                                                             | Bankruptcy Court fo                                                                                                      | or the : <u>NORTHERN</u> District o                                                                                                                                            |                                                                                                                               |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | ase Number<br>fknown)                                                    |                                                                                                                          |                                                                                                                                                                                | (State)                                                                                                                       |                                                                                                                                                                                                                                                                                                               | Check if this is an amended filing |
| Offi                        | icial Fo                                                                 | orm 106G                                                                                                                 |                                                                                                                                                                                |                                                                                                                               |                                                                                                                                                                                                                                                                                                               | Ŭ                                  |
|                             |                                                                          |                                                                                                                          | ory Contracts and                                                                                                                                                              | d Unexpired Lea                                                                                                               | ses                                                                                                                                                                                                                                                                                                           | 12/15                              |
| nformadditi  1. D  2. Li ex | nation. If nonal pages o you hav No. Ch Yes. Fill ist separat xample, re | nore space is need, write your name any executory eck this box and in all of the informely each personnt, vehicle lease, | eded, copy the additional page and case number (if know contracts or unexpired lease submit this form to the court w mation below even if the control or company with whom you | ge, fill it out, number the enn). es? eith your other schedules. You acts or leases are listed in have the contract or lease. | n are equally responsible for supplying correct ntries, and attach it to this page. On the top of an ou have nothing else to report on this form.  Schedule A/B: Property (Official Form 106A/B)  Then state what each contract or lease is for (foruction booklet for more examples of executory contracts.) | or                                 |
|                             | nexpired le                                                              |                                                                                                                          | hom you have the contract o                                                                                                                                                    | r lease                                                                                                                       | State what the contract or lease                                                                                                                                                                                                                                                                              | e is for                           |
| 2.1                         |                                                                          |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               | -                                                                                                                                                                                                                                                                                                             |                                    |
|                             | Name                                                                     |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               | _                                                                                                                                                                                                                                                                                                             |                                    |
|                             | Number                                                                   | Street                                                                                                                   |                                                                                                                                                                                |                                                                                                                               |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | City                                                                     |                                                                                                                          | State 2                                                                                                                                                                        | Zip Code                                                                                                                      | -                                                                                                                                                                                                                                                                                                             |                                    |
| 2.2                         |                                                                          |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | Name                                                                     |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | Number                                                                   | Street                                                                                                                   |                                                                                                                                                                                |                                                                                                                               | -                                                                                                                                                                                                                                                                                                             |                                    |
|                             | City                                                                     |                                                                                                                          | State 2                                                                                                                                                                        | Zip Code                                                                                                                      | -                                                                                                                                                                                                                                                                                                             |                                    |
| 2.3                         |                                                                          |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | Name                                                                     |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               | -                                                                                                                                                                                                                                                                                                             |                                    |
|                             | Number                                                                   | Street                                                                                                                   |                                                                                                                                                                                |                                                                                                                               | -                                                                                                                                                                                                                                                                                                             |                                    |
|                             | City                                                                     |                                                                                                                          | State 2                                                                                                                                                                        | Zip Code                                                                                                                      | -                                                                                                                                                                                                                                                                                                             |                                    |
| 2.4                         |                                                                          |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | Name                                                                     |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | Number                                                                   | Street                                                                                                                   |                                                                                                                                                                                |                                                                                                                               | -                                                                                                                                                                                                                                                                                                             |                                    |
|                             | City                                                                     |                                                                                                                          | State 2                                                                                                                                                                        | Zip Code                                                                                                                      | -                                                                                                                                                                                                                                                                                                             |                                    |
| 2.5                         |                                                                          |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               |                                                                                                                                                                                                                                                                                                               |                                    |
|                             | Name                                                                     |                                                                                                                          |                                                                                                                                                                                |                                                                                                                               | -                                                                                                                                                                                                                                                                                                             |                                    |
|                             | Number                                                                   | Street                                                                                                                   |                                                                                                                                                                                |                                                                                                                               | -                                                                                                                                                                                                                                                                                                             |                                    |

State Zip Code

City

Official Form 106G

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| Fill in this in     | nformation to ident  | ify your case:                      |           |
|---------------------|----------------------|-------------------------------------|-----------|
| Debtor 1            | Ronald               | John                                | Stewart   |
|                     | First Name           | Middle Name                         | Last Name |
| Debtor 2            |                      |                                     |           |
| (Spouse, if filing) | First Name           | Middle Name                         | Last Name |
| United States       | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ |           |
| Case Number         | r                    |                                     | (State)   |
| (If known)          |                      |                                     |           |

## Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any Ao        | dditional Pa | ages, write your name and             | I case number (if known). Answ                                   | er every questi | on.                                                                    |
|---------------|--------------|---------------------------------------|------------------------------------------------------------------|-----------------|------------------------------------------------------------------------|
| 1. <b>D</b> c | o you have   | any codebtors? (If you are            | e filing a joint case, do not list eith                          | ner spouse as a | codebtor.)                                                             |
|               | No.          |                                       |                                                                  |                 |                                                                        |
|               | Yes          |                                       |                                                                  |                 |                                                                        |
|               |              |                                       | in a community property state of evada, New Mexico, Puerto Rico, | = :             | ommunity property states and territories include gton, and Wisconsin.) |
|               | No. Go t     | to line 3.                            |                                                                  |                 |                                                                        |
|               | Yes. Did     | I your spouse, former spous           | se, or legal equivalent live with yo                             | ou at the time? |                                                                        |
|               | _            | s. Inwhich community state            | or territory did you live?                                       | ·               | Fill in the name and current address of that person.                   |
|               | Name         | e of your spouse, former spouse or le | egal equivalent                                                  |                 |                                                                        |
|               | Numb         | per Street                            |                                                                  |                 |                                                                        |
|               | City         |                                       | State                                                            | Zip Cod         | 9                                                                      |
| S             |              | F, or Schedule G to fill out          | Column 2.                                                        |                 | Column 2: The creditor to whom you owe the debt                        |
| 0.4           |              |                                       |                                                                  |                 | Check all schedules that apply:                                        |
| 3.1           |              |                                       |                                                                  |                 | Schedule D, line                                                       |
|               | Name         |                                       |                                                                  |                 | Schedule E/F, line                                                     |
|               | Number       | Street                                |                                                                  |                 | Schedule G, line                                                       |
|               | City         |                                       | State                                                            | Zip Code        |                                                                        |
| 3.2           |              |                                       |                                                                  |                 | Schedule D, line                                                       |
|               | Name         |                                       |                                                                  |                 | Schedule E/F, line                                                     |
|               | Number       | Street                                |                                                                  |                 | Schedule G, line                                                       |
|               | City         |                                       | State                                                            | Zip Code        |                                                                        |
| 3.3           |              |                                       |                                                                  |                 | Schedule D, line                                                       |
|               | Name         |                                       |                                                                  |                 | Schedule E/F, line                                                     |
|               | Number       | Street                                |                                                                  |                 | Schedule G, line                                                       |
|               | City         |                                       | State                                                            | Zip Code        |                                                                        |

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| Fill in this in           | nformation to iden   | tify your case:                    |                   |
|---------------------------|----------------------|------------------------------------|-------------------|
| Debtor 1                  | Ronald First Name    | John Middle Name                   | Stewart Last Name |
| Debtor 2                  |                      |                                    |                   |
| (Spouse, if filing)       | First Name           | Middle Name                        | Last Name         |
| United States             | Bankruptcy Court for | r the : <u>NORTHERN DISTRICT O</u> | DF ILLINOIS       |
| Case Number<br>(If known) | r                    |                                    | _                 |
|                           |                      |                                    |                   |

## Official Form 106I

**Schedule I: Your Income** 

12/15

MM / DD / YYYY

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment                                                                                                                        |                                  |                           |              |                                   |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------|--------------|-----------------------------------|
| 1. | Fill in your employment information                                                                                                              |                                  | Debtor 1                  |              | Debtor 2 or non-filing spouse     |
|    | If you have more than one job, attach a separate page with information about additional employers.                                               | Employment status                | X Employed Not employed   |              | X Employed Not employed           |
|    | Include part-time, seasonal, or self-employed work.                                                                                              | Occupation                       | Diesel Mechanic           |              | Call Center Manager               |
|    | Occupation may Include student or homemaker, if it applies.                                                                                      | Employers name                   | Rush Enterprises          |              | Superior Ambulance Services       |
|    |                                                                                                                                                  | Employers address                |                           |              |                                   |
|    |                                                                                                                                                  |                                  |                           |              | j                                 |
|    |                                                                                                                                                  | How long employed there?         |                           |              |                                   |
| Pa | rt 2: Give Details About Monthl                                                                                                                  | ly Income                        |                           |              |                                   |
|    | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse har lines below. If you need more space      | ve more than one employer, combi | ine the information for a |              |                                   |
|    |                                                                                                                                                  |                                  |                           | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. | List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. |                                  |                           | \$3,538.30   | \$9,704.26                        |
| 3. | 3. Estimate and list monthly overtime pay.                                                                                                       |                                  |                           | \$0.00       | \$0.00                            |
| 4. | Calculate gross income. Add line                                                                                                                 | e 2 + line 3.                    |                           | \$3,538.30   | \$9,704.26                        |

 Official Form 106I
 Record # 715366
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1 Ronald

Ronald John Stewart
First Name Middle Name Last Name

Case Number (if known) \_\_\_

|               |               |                                                                                                                                                                                                                                                                                                                                             |              | For Debtor 1             | For Debtor 2 or non-filing spouse |                       |
|---------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------|-----------------------------------|-----------------------|
|               | Copy          | y line 4 here                                                                                                                                                                                                                                                                                                                               | 4.           | \$3,538.30               | \$9,704.26                        |                       |
| 5. <b>L</b>   | ist all       | payroll deductions:                                                                                                                                                                                                                                                                                                                         |              |                          |                                   |                       |
|               | 5a. <b>T</b>  | ax, Medicare, and Social Security deductions                                                                                                                                                                                                                                                                                                | 5a.          | \$0.00                   | \$2,379.56                        |                       |
|               | 5b. <b>N</b>  | Mandatory contributions for retirement plans                                                                                                                                                                                                                                                                                                | 5b.          | \$0.00                   | \$0.00                            |                       |
|               | 5c. <b>V</b>  | oluntary contributions for retirement plans                                                                                                                                                                                                                                                                                                 | 5c.          | \$0.00                   | \$970.43                          |                       |
|               | 5d. <b>F</b>  | Required repayments of retirement fund loans                                                                                                                                                                                                                                                                                                | 5d.          | \$0.00                   | \$216.67                          |                       |
|               | 5e. <b>I</b>  | nsurance                                                                                                                                                                                                                                                                                                                                    | 5e.          | \$0.00                   | \$0.00                            |                       |
|               | 5f. <b>C</b>  | Domestic support obligations                                                                                                                                                                                                                                                                                                                | 5f.          | \$0.00                   | \$0.00                            |                       |
|               | 5g. <b>L</b>  | Jnion dues                                                                                                                                                                                                                                                                                                                                  | 5g.          | \$0.00                   | \$0.00                            |                       |
|               | 5h. <b>C</b>  | Other deductions. Specify:                                                                                                                                                                                                                                                                                                                  | 5h.          | \$0.00                   | \$96.55                           |                       |
| 6. <b>A</b>   | dd the        | payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.                                                                                                                                                                                                                                                                          | 6.           | \$0.00                   | \$3,663.20                        |                       |
| 7. C          | alcula        | te total monthly take-home pay. Subtract line 6 from line 4.                                                                                                                                                                                                                                                                                | 7.           | \$3,538.30               | \$6,041.06                        |                       |
| 8. <b>L</b> i | st all        | other income regularly received:                                                                                                                                                                                                                                                                                                            | _            |                          |                                   |                       |
|               | 8a.           | Net income from rental property and from operating a business,                                                                                                                                                                                                                                                                              |              |                          |                                   |                       |
|               |               | profession, or farm                                                                                                                                                                                                                                                                                                                         |              |                          |                                   |                       |
|               |               | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                                                                                                                                                                                                           |              |                          |                                   |                       |
|               |               | monthly net income.                                                                                                                                                                                                                                                                                                                         | 8a.          | \$0.00                   | \$0.00                            |                       |
|               | 8b.           | Interest and dividends                                                                                                                                                                                                                                                                                                                      | 8b.          | \$0.00                   | \$0.00                            |                       |
|               | 8c.           | Family support payments that you, a non-filing spouse, or a                                                                                                                                                                                                                                                                                 | 8c.          | \$ 0.00                  | \$ 0.00                           |                       |
|               |               | dependent regularly receive                                                                                                                                                                                                                                                                                                                 | _            |                          |                                   |                       |
|               |               | Include alimony, spousal support, child support, maintenance, divorce                                                                                                                                                                                                                                                                       |              |                          |                                   |                       |
|               |               | settlement, and property settlement.                                                                                                                                                                                                                                                                                                        |              |                          |                                   |                       |
|               | 8d.           | Unemployment compensation                                                                                                                                                                                                                                                                                                                   | 8d.          | \$0.00                   | \$0.00                            |                       |
|               | 8e.           | Social Security                                                                                                                                                                                                                                                                                                                             | 8e.          | \$0.00                   | \$0.00                            |                       |
|               | 8f.           | Other government assistance that you regularly receive                                                                                                                                                                                                                                                                                      | 8f.          | \$0.00                   | \$0.00                            |                       |
|               |               | Include cash assistance and the value (if known) of any non-cash                                                                                                                                                                                                                                                                            | _            |                          |                                   |                       |
|               |               | assistance that you receive, such as food stamps (benefits under the                                                                                                                                                                                                                                                                        |              |                          |                                   |                       |
|               |               | Supplemental Nutrition Assistance Program) or housing subsidies.                                                                                                                                                                                                                                                                            |              |                          |                                   |                       |
|               |               | Specify:                                                                                                                                                                                                                                                                                                                                    |              |                          |                                   |                       |
|               | 8g.           | Pension or retirement income                                                                                                                                                                                                                                                                                                                | 8g.          | \$0.00                   | \$0.00                            |                       |
|               | 8h.           | Other monthly income. Specify:                                                                                                                                                                                                                                                                                                              | 8h.          | \$0.00                   | \$0.00                            |                       |
| 9.            | Add           | <b>all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.                                                                                                                                                                                                                                                                   | 9.           | \$0.00                   | \$0.00                            |                       |
| 10.           | Calc          | ulate monthly income. Add line 7 + line 9.                                                                                                                                                                                                                                                                                                  | 10.          |                          |                                   |                       |
|               |               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.                                                                                                                                                                                                                                                                      |              | \$3,538.30 +             | \$6,041.06                        | \$9,579.36            |
| 11.           | other<br>Do n | e all other regular contributions to the expenses that you list in Schedul de contributions from an unmarried partner, members of your household, you friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are strictly:  the amount in the last column of line 10 to the amount in line 11. The re | our dependen | p pay expenses listed in | Schedule J.                       | 11. \$0.00            |
|               |               | e that amount on the Summary of Schedules and Statistical Summary of C                                                                                                                                                                                                                                                                      |              | •                        | applies                           | 12. <b>\$9,579.36</b> |
| 13.           | X             | ou expect an increase or decrease within the year after you file this form<br>No.<br>Yes. Explain:                                                                                                                                                                                                                                          | n?           |                          |                                   |                       |

| Fill in this in              | formation to identify you    | ur case:                 |                                                                              |                                                                          |                                          |                               |
|------------------------------|------------------------------|--------------------------|------------------------------------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------|-------------------------------|
| Debtor 1                     | Ronald                       | John                     | Stewart                                                                      | Check if this is                                                         | <b>3</b> :                               |                               |
|                              | First Name                   | Middle Name              | Last Name                                                                    | An amen                                                                  | •                                        |                               |
| Debtor 2 (Spouse, if filing) | First Name                   | Middle Name              | Last Name                                                                    | _                                                                        | ment showing pos<br>s of the following o | t-petition chapter 13         |
| United States                | Bankruptcy Court for the : _ | NORTHERN DISTRICT        | OF ILLINOIS                                                                  |                                                                          |                                          |                               |
| Case Number<br>(If known)    | Г                            |                          |                                                                              | MM / DD                                                                  | / YYYY                                   |                               |
| Official F                   | orm 106J                     |                          |                                                                              |                                                                          | te filing for Debtor a separate house    | 2 because Debtor 2            |
|                              |                              |                          |                                                                              | maintains                                                                | s a separate nouse                       |                               |
|                              | e J: Your Exp                |                          | ole are filing together, both                                                | are equally responsible for suppl                                        | ving correct inform                      | 12/14                         |
| -                            |                              |                          |                                                                              | ges, write your name and case no                                         |                                          |                               |
| Part 1:                      | Describe Your Household      |                          |                                                                              |                                                                          |                                          |                               |
| 1. Is this a joi             | nt case?                     |                          |                                                                              |                                                                          |                                          |                               |
|                              | Go to line 2.                |                          |                                                                              |                                                                          |                                          |                               |
| Yes.                         | Does Debtor 2 live in a s    | eparate household?       |                                                                              |                                                                          |                                          |                               |
|                              |                              | t file a separate Schedu | ıle J.                                                                       |                                                                          |                                          |                               |
|                              |                              |                          |                                                                              |                                                                          |                                          |                               |
| 2. Do you l                  | nave dependents?             | X No                     |                                                                              | Dependent's relationship to<br>Debtor 1 or Debtor 2                      | Dependent's age                          | Does dependent live with you? |
| Do not lis<br>Debtor 2       | st Debtor 1 and              |                          | t this information for                                                       | 20000: 10: 2000: 2                                                       |                                          | X No                          |
| Do not s                     | tate the dependents'         | oud dopo.                |                                                                              |                                                                          |                                          | Yes                           |
| names.                       | ate the depondente           |                          |                                                                              |                                                                          |                                          | <b>X</b> No                   |
|                              |                              |                          |                                                                              |                                                                          |                                          | Yes                           |
|                              |                              |                          |                                                                              |                                                                          |                                          | X No                          |
|                              |                              |                          |                                                                              |                                                                          |                                          | Yes                           |
|                              |                              |                          |                                                                              |                                                                          |                                          | X No                          |
|                              |                              |                          |                                                                              |                                                                          |                                          | Yes                           |
|                              |                              |                          |                                                                              |                                                                          |                                          |                               |
| 3. Do your                   | expenses include             |                          |                                                                              |                                                                          |                                          | Yes                           |
| expense                      | s of people other than       | X No                     |                                                                              |                                                                          |                                          |                               |
| yourself                     | and your dependents?         |                          |                                                                              |                                                                          |                                          |                               |
|                              | Estimate Your Ongoing Mo     |                          | Jaco vari ara vaina thia fam                                                 | m as a sumulament in a Chantar 4                                         | 2 to                                     |                               |
| -                            |                              |                          |                                                                              | n as a supplement in a Chapter 1<br>, check the box at the top of the fo | -                                        |                               |
| the applicable               |                              | ah gayaramant agaist     | ance if you know the value                                                   |                                                                          |                                          |                               |
|                              | •                            | -                        | ance if you know the value<br><i><sup>•</sup> Incom</i> e (Official Form 106 | l.)                                                                      | •                                        | Your expenses                 |
| 4. The rent                  | tal or home ownership e      | xpenses for your resid   | dence. Include first mortgag                                                 | e payments and                                                           | _                                        |                               |
| any rent                     | for the ground or lot.       |                          |                                                                              |                                                                          | 4.                                       | \$1,127.00                    |
| If not in                    | cluded in line 4:            |                          |                                                                              |                                                                          |                                          |                               |
| 4a. Re                       | eal estate taxes             |                          |                                                                              |                                                                          | 4a.                                      | \$0.00                        |
| 4b. Pro                      | operty, homeowner's, or r    | enter's insurance        |                                                                              |                                                                          | 4b.                                      | \$0.00                        |
|                              | me maintenance, repair,      |                          |                                                                              |                                                                          | 4c.                                      | \$25.00                       |
| 4d. Ho                       | meowner's association o      | r condominium dues       |                                                                              |                                                                          | 4d.                                      | \$0.00                        |

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Last Name

Ronald John Stewart

Middle Name

Debtor 1

First Name

IGE 30 01 58

Case Number (if known) \_\_\_\_\_

Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$290.00 6a. 6a. Electricity, heat, natural gas \$150.00 6b. Water, sewer, garbage collection \$400.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$1,000.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$280.00 9. Clothing, laundry, and dry cleaning 10. \$65.00 Personal care products and services 10. \$200.00 11. Medical and dental expenses 11. \$866.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$160.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$100.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$450.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$300.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$569.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 715366

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Ronald John Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$465.00 21. Other. Specify: Pet Care (\$460.00), Postage/Bank Fees (\$5.00), 21. \$6,447.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$9,579.36 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$6,447.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$3,132.36 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 715366 Schedule J: Your Expenses Page 3 of 3

| Fill in this in           | Fill in this information to identify your case: |                                   |                  |  |  |  |  |
|---------------------------|-------------------------------------------------|-----------------------------------|------------------|--|--|--|--|
| Debtor 1                  | Ronald                                          | John                              | Stewart          |  |  |  |  |
|                           | First Name                                      | Middle Name                       | Last Name        |  |  |  |  |
| Debtor 2                  |                                                 |                                   |                  |  |  |  |  |
| (Spouse, if filing)       | First Name                                      | Middle Name                       | Last Name        |  |  |  |  |
| United States             | Bankruptcy Court for                            | the : <u>NORTHERN</u> District of | ILLINOIS (State) |  |  |  |  |
| Case Number<br>(If known) |                                                 |                                   | <u></u>          |  |  |  |  |

## Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below                                             |                                                                                               |
|--------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Did you pay or agree to pay someone who is NOT a       | an attorney to help you fill out bankruptcy forms?                                            |
| Yes. Name of Person                                    | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|                                                        |                                                                                               |
| Under penalty of perjury, I declare that I have read t | the summary and schedules filed with this declaration and that they are true and              |
| ✗ /s/ Ronald John Stewart, III                         | ×                                                                                             |
| Signature of Debtor 1                                  | Signature of Debtor 2                                                                         |
| Date 08/11/2016<br>MM / DD / YYYY                      | DateMM / DD / YYYY                                                                            |

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|                          |                      |                                  | Ocument 1 d      |  |
|--------------------------|----------------------|----------------------------------|------------------|--|
| Fill in this ir          | nformation to identi | fy your case:                    |                  |  |
| Debtor 1                 | Ronald               | John                             | Stewart          |  |
|                          | First Name           | Middle Name                      | Last Name        |  |
| Debtor 2                 |                      |                                  |                  |  |
| (Spouse, if filing)      | First Name           | Middle Name                      | Last Name        |  |
|                          |                      | he : <u>NORTHERN</u> District of | ILLINOIS (State) |  |
| Case Numbe<br>(If known) | :r                   |                                  | <del></del>      |  |

## Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| number (if known). Answer every question. |                                                                                                                                          |                               |             |                               |  |  |  |  |
|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------|-------------------------------|--|--|--|--|
| P                                         | ar: 1: Give Details About Your Marital Status and Where Yo                                                                               | ou Lived Before               |             |                               |  |  |  |  |
| 01.                                       | What is your current marital status?                                                                                                     |                               |             |                               |  |  |  |  |
|                                           | Married                                                                                                                                  |                               |             |                               |  |  |  |  |
|                                           | Not married                                                                                                                              |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
| 02                                        | 02 During the last 3 years, have you lived anywhere other than where you live now?                                                       |                               |             |                               |  |  |  |  |
|                                           | No.  Yes. List all of the places you lived in the last 3 years. Do                                                                       | o not include where yo        | u live now. |                               |  |  |  |  |
|                                           | _                                                                                                                                        |                               |             |                               |  |  |  |  |
|                                           | Debtor 1                                                                                                                                 | Dates Debtor 1<br>lived there | Debtor 2:   | Dates Debtor 2<br>lived there |  |  |  |  |
| 03                                        | Within the last 8 years, did you ever live with a spouse or property states and territories include Arizona, California, and Wisconsin.) | legal equivalent in a d       |             | area alole                    |  |  |  |  |
|                                           | No.                                                                                                                                      |                               |             |                               |  |  |  |  |
|                                           | Yes. Make sure you fill out Schedule H: Your Codebtors                                                                                   | (Official Form 106H).         |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
| F                                         | Explain the Sources of Your Income                                                                                                       |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
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|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |
|                                           |                                                                                                                                          |                               |             |                               |  |  |  |  |

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Debtor 1 Ronald John Stewart Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$11,036 \$71,663 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$35,000 \$100,000 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$55,000 Wages, commissions. \$100,000 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) \$28,000 Disability From January 1 of current year until the date you filed for bankruptcy: List Certain Payments You Made Before You Filed for Bankruptcy

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Ronald John Stewart Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments \$22,134 **ALLY Financial 200 Renaissance** Monthly \$1.707 ■ Mortgage Car Ctr Detroit MI 48243 Credit card Loan repayment Suppliers or vendors Other Wells Fargo HM Mortgag 8480 Monthly \$3,381 \$111,206 Mortgage Car Stagecoach Cir Frederick MD ☐ Credit card 21701 ☐ Loan repayment Suppliers or vendors Other \_ Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe

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| Deptor                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | JOHN                                                                                                                                           | Stewart                    | <del></del>            | Case Number (If Knowl         | <i>'</i> '       |                                 |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------|-------------------------------|------------------|---------------------------------|--|--|--|
|                                                                                                                               | First Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Middle Name                                                                                                                                    | Last Name                  |                        |                               |                  |                                 |  |  |  |
| 08                                                                                                                            | thin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | an insider?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Include payments on debts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | guaranteed or cosigned                                                                                                                         | by an insider.             |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | ☐ No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Yes. List all payments to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | an insider                                                                                                                                     |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Tes. List all payments to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | an insider.                                                                                                                                    | D. C. C.                   | T. (.)                 | A                             |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                | Dates of                   | Total amount paid      | Amount you still owe          |                  | r this payment<br>editor's name |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                | payment                    | •                      |                               |                  | sultor 5 manne                  |  |  |  |
|                                                                                                                               | Parent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                | 2015                       | \$1,500                |                               | Loan             |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
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|                                                                                                                               | Within 1 year before you file                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | List all such matters, including modifications, and contract of the contract o |                                                                                                                                                | s, small claims actions, o | divorces, collection s | suits, paternity actions, sup | ont or custody   |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | disputes.                                                                                                                                      |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | ∐ No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Yes. Fill in the details.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
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|                                                                                                                               | Discover Bk VS Ronale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | d Stewart                                                                                                                                      | Collection                 | Will C                 | County Circuit Court          |                  | Pending                         |  |  |  |
|                                                                                                                               | CASE NUMBER#16S0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | C2707                                                                                                                                          |                            |                        |                               |                  | On appeal                       |  |  |  |
|                                                                                                                               | <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                |                            |                        |                               |                  | Concluded                       |  |  |  |
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|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Within 1 year before you file                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                | ny of your property repo   | ssessed, foreclosed    | , garnished, attached, seiz   | ed, or levied?   |                                 |  |  |  |
|                                                                                                                               | Check all that apply and fill I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ck all that apply and fill in the details below.                                                                                               |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | No. Go to line 11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | No. Go to line 11                                                                                                                              |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Yes. Fill in the information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | on below.                                                                                                                                      |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
| 11                                                                                                                            | Within 90 days before you                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | n 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | or refuse to make a payme                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | use to make a payment because you owed a debt?                                                                                                 |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | No. Go to line 11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | line 11                                                                                                                                        |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Fill in the information below.                                                                                                                 |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Nithin 1 year before you file                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                | any of your proporty i     | n the necession o      | f an assigned for the bone    | fit of craditors | •                               |  |  |  |
|                                                                                                                               | court-appointed receiver, a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                |                            | ii tile possession o   | an assignee for the bene      | in or creditors, | a                               |  |  |  |
|                                                                                                                               | No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | •                                                                                                                                              |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Yes.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
| Pa                                                                                                                            | List Certain Gifts an                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | nd Contributions                                                                                                                               |                            |                        |                               |                  |                                 |  |  |  |
| 13                                                                                                                            | Within 2 years before you f                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | iled for bankruptcy, did                                                                                                                       | l vou give any gifts wit   | h a total value of m   | ore than \$600 per person     | ·                |                                 |  |  |  |
| Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               | Yes. Fill in the details for each gift.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |
|                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                |                            |                        |                               |                  |                                 |  |  |  |

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Case Number (if known) \_\_

Stewart

John

Ronald

|     |       | First Name                                             | Middle Name           | Last Name                                                                                                                                          |                          |                                      |  |
|-----|-------|--------------------------------------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------|--|
| 14  | Wit   | thin 2 years before you filed                          | for bankruptcy, did y | ou give any gifts or contributions with a total value of more th                                                                                   | an \$600 to any ch       | arity?                               |  |
|     | ∏ No. |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     | =     | Yes. Fill in the details for each gift.                |                       |                                                                                                                                                    |                          |                                      |  |
|     | _     |                                                        | <b>9</b>              |                                                                                                                                                    |                          |                                      |  |
|     |       | Gifts or contributions to cha<br>total more than \$600 | arities that          | Describe what you contributed                                                                                                                      | Date you contributed     | Value                                |  |
|     |       | Sacred Heart                                           |                       | Offering                                                                                                                                           | Monthly                  | \$100                                |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       | Lint Contain Lancas                                    |                       |                                                                                                                                                    |                          |                                      |  |
| i d | art 6 | List Certain Losses                                    |                       |                                                                                                                                                    |                          |                                      |  |
| 15  |       | thin 1 year before you filed fonds                     | or bankruptcy or sinc | e you filed for bankruptcy, did you lose anything because of t                                                                                     | heft, fire, other dis    | easter, or                           |  |
|     |       | No.                                                    |                       |                                                                                                                                                    |                          |                                      |  |
|     |       | Yes. Fill in the details for each                      | ch gift.              |                                                                                                                                                    |                          |                                      |  |
| Pa  | art 7 | List Certain Payments o                                | r Transfers           |                                                                                                                                                    |                          |                                      |  |
|     | abo   | out seeking bankruptcy or pr                           | reparing a bankruptc  | ou or anyone else acting on your behalf pay or transfer any pro<br>y petition?<br>s, or credit counseling agencies for services required in your l |                          | ou consulted                         |  |
|     | _     |                                                        | , p pp                | ,                                                                                                                                                  |                          |                                      |  |
|     | =     | No.<br>Yes. Fill in the details                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       | Party Contact Info                                     |                       | Description and value of any property transferred                                                                                                  | Date payment or transfer | Amount of payment                    |  |
|     |       | Geraci Law L.L.C.                                      |                       |                                                                                                                                                    |                          | Payment/Value: \$4,000.00: \$0.00    |  |
|     |       | 55 E. Monroe Street #3400                              | <u> </u>              |                                                                                                                                                    |                          | paid prior to filing,                |  |
|     |       | Chicago,IL 60603                                       |                       |                                                                                                                                                    |                          | balance to be paid through the plan. |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       | Party Contact Info                                     |                       | Description and value of any property transferred                                                                                                  | Date payment or transfer | Amount of payment                    |  |
|     |       | Hananwill Credit Counselin                             | g                     | Credit Counseling Services                                                                                                                         | 2016                     | \$25.00                              |  |
|     |       | 115 N. Cross St.                                       |                       |                                                                                                                                                    |                          |                                      |  |
|     |       | Robinson, IL 62454                                     |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     | pro   | mised to help you deal with                            | your creditors or to  | ou or anyone else acting on your behalf pay or transfer any promake payments to your creditors?                                                    | perty to anyone w        | /ho                                  |  |
|     | _     | not include any payment or                             | u ansier mai you iist | eu on mie 16.                                                                                                                                      |                          |                                      |  |
|     |       | No. Yes. Fill in the details.                          |                       |                                                                                                                                                    |                          |                                      |  |
|     | Ц     | res. i iii iii tile uetalis.                           |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |
|     |       |                                                        |                       |                                                                                                                                                    |                          |                                      |  |

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| ebto | r 1                                                                                                                                                                                                                                                                                                                                                                                                                                              | Ronald                                         | John                      | Stewart                                                                                                                | Case                          | Number (if known)                                    |                                         |  |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------------------------|-----------------------------------------|--|
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                  | First Name                                     | Middle Name               | Last Name                                                                                                              |                               |                                                      |                                         |  |
|      | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  Do not include gifts and transfers that you have already listed on this statement. |                                                |                           |                                                                                                                        |                               |                                                      |                                         |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                  | No.<br>Yes. Fill in the details                | for each gift.            |                                                                                                                        |                               |                                                      |                                         |  |
| 19   | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)                                                                                                                                                                                                                                      |                                                |                           |                                                                                                                        |                               |                                                      |                                         |  |
|      | =                                                                                                                                                                                                                                                                                                                                                                                                                                                | No.<br>Yes. Fill in the details                | for each gift.            |                                                                                                                        |                               |                                                      |                                         |  |
| Pa   | art 8:                                                                                                                                                                                                                                                                                                                                                                                                                                           | List Certain Finan                             | icial Accounts, Instr     | uments, Safe Deposit Boxes, and Sto                                                                                    | rage Units                    |                                                      |                                         |  |
|      | sold<br>Inclu<br>hous                                                                                                                                                                                                                                                                                                                                                                                                                            | l, moved, or transferr<br>ude checking, saving | ed?<br>s, money market, o | y, were any financial accounts or in<br>or other financial accounts; certific<br>ciations, and other financial institu | ates of deposit; shares in    | · -                                                  |                                         |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Yes. Fill in the details.                      |                           | Last 4 digits of account number                                                                                        | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |  |
| 21   | cash                                                                                                                                                                                                                                                                                                                                                                                                                                             | h, or other valuables                          |                           | rear before you filed for bankruptc                                                                                    | y, any safe deposit box c     | or other depository for s                            | securities,                             |  |
|      | =                                                                                                                                                                                                                                                                                                                                                                                                                                                | No.<br>Yes. Fill in the details.               |                           | Who else had access to it?                                                                                             | Describe the conte            | nts                                                  | Do you still                            |  |
| 00   |                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                |                           |                                                                                                                        |                               |                                                      | have it?                                |  |
| 22   | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                | No.                                            | <del>-</del>              | or place other than your home with                                                                                     | in 1 year before you filed    | l for bankruptcy?                                    |                                         |  |
|      | Ц,                                                                                                                                                                                                                                                                                                                                                                                                                                               | Yes. Fill in the details.                      |                           | Who else has or had access to it?                                                                                      | Describe the conte            | nts                                                  | Do you still have it?                   |  |
| Pa   | art 9:                                                                                                                                                                                                                                                                                                                                                                                                                                           | Identify Property                              | You Hold or Control       | for Someone Else                                                                                                       |                               |                                                      |                                         |  |
|      | •                                                                                                                                                                                                                                                                                                                                                                                                                                                | you hold or control as<br>someone.             | ny property that so       | meone else owns? Include any pro                                                                                       | perty you borrowed fron       | n, are storing for, or hol                           | d in trust                              |  |
|      | =                                                                                                                                                                                                                                                                                                                                                                                                                                                | No.                                            |                           |                                                                                                                        |                               |                                                      |                                         |  |
|      | □ `                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes. Fill in the details.                      |                           | Where is the property?                                                                                                 | Describe the prope            | orty                                                 | Value                                   |  |
| Pa   | rt 10                                                                                                                                                                                                                                                                                                                                                                                                                                            | Give Details Abou                              | ıt Environmental Info     | ormation                                                                                                               |                               |                                                      |                                         |  |
| For  | the p                                                                                                                                                                                                                                                                                                                                                                                                                                            | ourpose of Part 10, th                         | ne following definiti     | ons apply:                                                                                                             |                               |                                                      |                                         |  |
| ı    | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.                                                                                        |                                                |                           |                                                                                                                        |                               |                                                      |                                         |  |
|      | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.                                                                                                                                                                                                                                             |                                                |                           |                                                                                                                        |                               |                                                      |                                         |  |
|      | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.                                                                                                                                                                                                                                                          |                                                |                           |                                                                                                                        |                               |                                                      |                                         |  |
| Rep  | Report all notices, releases, and proceedings that you know about, regardless of when they occurred.                                                                                                                                                                                                                                                                                                                                             |                                                |                           |                                                                                                                        |                               |                                                      |                                         |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                |                           |                                                                                                                        |                               |                                                      |                                         |  |

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Stewart Case Number (if known) First Name Middle Name Last Name 24 Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 25 Have you notified any governmental unit of any release of hazardous material? No. Yes. Fill in the details. Governmental unit Date of notice Environmental law, if you know it 26 Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Nature of the case Status of the case Part 11: **Give Details About Your Business or Connections to Any Business** 27 Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. 28 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No. Yes. Fill in the details. Date issued Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ronald John Stewart, III Signature of Debtor 2 Signature of Debtor 1 Date 08/11/2016 MM / DD / YYYY MM / DD / YYYY Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No \_. Attach the Bankruptcy Petition Preparer's Notice. Yes. Name of person \_ Declaration, and Signature (Official Form 119).

Ronald

Debtor 1

John

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In re                |                                                                                                                                                   |                                    |                  |                             |  |
|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------|-----------------------------|--|
| Ronald John S        | Stewart III / Debtor                                                                                                                              |                                    | Case No:         |                             |  |
|                      |                                                                                                                                                   |                                    | Chapter:         | Chapter 13                  |  |
|                      | DISCLOSURE OF CO                                                                                                                                  | OMPENSATION OF ATTORI              | NEY FOR DEI      | BTOR                        |  |
| compensation p       | to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contact. | f the petition in bankruptcy, or a | greed to be pai  | d to me, for services       |  |
| For legal            | services, I have agreed to accept                                                                                                                 | \$4,000.00                         |                  |                             |  |
| Prior to th          | he filing of this statement I have received                                                                                                       | \$0.00                             |                  |                             |  |
| Balance I            | Due                                                                                                                                               | \$4,000.00                         |                  |                             |  |
| 2. The source        | e of the compensation paid to me was:                                                                                                             |                                    |                  |                             |  |
| Deb                  | otor(s) Other: (specify                                                                                                                           |                                    |                  |                             |  |
| 3. The source        | e of compensation to be paid to me is:                                                                                                            |                                    |                  |                             |  |
| Del                  | obtor(s) Other: (specify                                                                                                                          |                                    |                  |                             |  |
|                      | re not agreed to share the above-disclosed con                                                                                                    | npensation with any other perso    | n unless they ar | re members and associates   |  |
| I have               | re agreed to share the above-disclosed comper                                                                                                     | nsation with a other person or pe  | ersons who are   | not members or associates   |  |
|                      |                                                                                                                                                   |                                    |                  |                             |  |
| a. Analy bankruptcy; | ysis of the debtor's financial situation, and re-                                                                                                 | ndering advice to the debtor in o  | determining wh   | ether to file a petition in |  |
| b. Prepa             | aration and filing of any petition, schedules, st                                                                                                 | tatements of affairs and plan wh   | nich may be req  | uired;                      |  |
| c. Repre             | esentation of the debtor at the meeting of cred                                                                                                   | litors and confirmation hearing,   | and any adjour   | ned hearings thereof;       |  |
| <b>6.</b> By agreem  | nent with the debtor(s), the above-disclosed fe                                                                                                   | ee does not include the following  | g service:       |                             |  |
|                      |                                                                                                                                                   | CERTIFICATION                      |                  |                             |  |
|                      | I certify that the foregoing is a complet payment to                                                                                              |                                    | arrangement f    | for                         |  |
|                      | me for representation of the debtor(s) in thi                                                                                                     |                                    |                  |                             |  |
|                      | Date: 08/11/2016                                                                                                                                  | /s/ Adam Emil Suchy                |                  |                             |  |
|                      | Date                                                                                                                                              | Signature of Attorney              |                  |                             |  |

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Geraci Law L.L.C. Name of law firm

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## UNITED STATESBANKRUPTCF8COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 16-25901 Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Mair 3. Personally review with the debtor Doc trigenthe considered petreson, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



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- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 16-25901 Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main Any portion of the retainer that is metricarne? age 45 in 45% responses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

## E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

# F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00

| 3. Before signing this agreement, the attorney has received ,\$               |
|-------------------------------------------------------------------------------|
| toward the flat fee, leaving a balance due of \$ _4,000 ; and \$ for expenses |
| leaving a balance due for the filing fee of \$0                               |



Case 16-25901 Doc 1 Filed 08/12/16 Entered 08/12/16 09:19:10 Desc Main 4. In extraordinary circumstances, successful to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Signed:

Debtor(s)

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are bank.

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Date: 8/1/2016

Consultation Attorney: ADD

Record #: 715-366

### Attorney - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment

additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed. No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility. Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee. PLAN: The plan payment is estimated to be \$\_ per month for 600 months. The payment and length of the plan are based on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure. My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other: My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan. I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened. Ronald Stewar (Joint Debtor)

Dated: 8-1-2016 Attorney for the Debtor(s) Representing Geraci Law L.L.C.

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Ronald John Stewart III / Debtor

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 08/11/2016 /s/ Ronald John Stewart, III

Ronald John Stewart, III

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

#### UNITED STATES BANKRUPTCY COURT

# NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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#### 

Form B 201A, Notice to Consumer Debtor(s)

In re Ronald John Stewart III / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 08/11/2016 | /s/ Ronald John Stewart, III |   |
|-------------------|------------------------------|---|
|                   | Ronald John Stewart, III     | _ |
| Dated: 08/11/2016 | /s/ Adam Emil Suchy          |   |
|                   | Attorney: Adam Emil Suchy    | _ |

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| ebtor 1        | Ronald                                         | John Stewa                                                                                                                                                                                                                                                          | art Case Numbe                                                                                                                                                                                       | er (if known)                                                              |  |  |  |
|----------------|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--|--|--|
| -D.O. 1        | First Name                                     | Middle Namo Last Nam                                                                                                                                                                                                                                                | a                                                                                                                                                                                                    |                                                                            |  |  |  |
|                |                                                | o for Departing Dumarco                                                                                                                                                                                                                                             |                                                                                                                                                                                                      |                                                                            |  |  |  |
| Part 6:        | Answer These Question                          | ns for Reporting Purposes                                                                                                                                                                                                                                           |                                                                                                                                                                                                      |                                                                            |  |  |  |
|                | hat kind of debts do<br>ou have?               | as "incurred by an individu                                                                                                                                                                                                                                         | ly consumer debts? Consumer debts are<br>al primarily for a personal, family, or househo                                                                                                             | edefined in 11 U.S.C. § 101(8)<br>old purpose."                            |  |  |  |
|                |                                                | No. Go to line 16b. Yes. Go to line 17.                                                                                                                                                                                                                             | ·                                                                                                                                                                                                    |                                                                            |  |  |  |
|                |                                                | 16b. Are your debts primari<br>money for a business or in                                                                                                                                                                                                           | ly business debts? Business debts are d<br>vestment or through the operation of the bus                                                                                                              | ebts that you incurred to obtain siness or investment.                     |  |  |  |
|                |                                                | No. Go to line 16c. Yes. Go to line 17.                                                                                                                                                                                                                             |                                                                                                                                                                                                      |                                                                            |  |  |  |
|                |                                                | 16c. State the type of debts you                                                                                                                                                                                                                                    | owe that are not consumer debts or busine                                                                                                                                                            | ss debts.                                                                  |  |  |  |
|                | re you filing under                            |                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                      |                                                                            |  |  |  |
|                | hapter 7?                                      | No. I am not filing under                                                                                                                                                                                                                                           |                                                                                                                                                                                                      |                                                                            |  |  |  |
| D              | o you estimate that after                      |                                                                                                                                                                                                                                                                     | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? |                                                                            |  |  |  |
| aı             | ny exempt property is                          | ∏No.                                                                                                                                                                                                                                                                |                                                                                                                                                                                                      |                                                                            |  |  |  |
|                | cluded and diministrative expenses             | _                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                      |                                                                            |  |  |  |
| aı             | re paid that funds will be                     | ∐Yes.                                                                                                                                                                                                                                                               |                                                                                                                                                                                                      |                                                                            |  |  |  |
|                | vailable for distribution unsecured creditors? |                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                      |                                                                            |  |  |  |
| ************   |                                                | <b>1</b> -49                                                                                                                                                                                                                                                        | □ 1,000-5,000                                                                                                                                                                                        | <b>2</b> 5,001-50,000                                                      |  |  |  |
|                | ow many creditors do<br>ou estimate that you   | <b>□</b> 50-99                                                                                                                                                                                                                                                      | 5,001-10,000                                                                                                                                                                                         | <b>5</b> 0,001-100,000                                                     |  |  |  |
| _              | we?                                            | <b>1</b> 00-199                                                                                                                                                                                                                                                     | 10,001-25,000                                                                                                                                                                                        | ☐ More than 100,000                                                        |  |  |  |
|                |                                                | 200-999                                                                                                                                                                                                                                                             |                                                                                                                                                                                                      |                                                                            |  |  |  |
| 19. <b>H</b>   | low much do you                                | \$0-\$50,000                                                                                                                                                                                                                                                        | \$1,000,001-\$10 million                                                                                                                                                                             | \$500,000,001-\$1 billion                                                  |  |  |  |
|                | stimate your assets to                         | <b>550,001-\$100,000</b>                                                                                                                                                                                                                                            | \$10,000,001-\$50 million                                                                                                                                                                            | \$1,000,000,001-\$10 billion                                               |  |  |  |
| b              | e worth?                                       | \$100,001-\$500,000                                                                                                                                                                                                                                                 | \$50,000,001-\$100 million                                                                                                                                                                           | \$10,000,000,001-\$50 billion                                              |  |  |  |
|                |                                                | \$500,001-\$1 million                                                                                                                                                                                                                                               | □ \$100,000,001-\$500 million                                                                                                                                                                        | ☐ More than \$50 billion                                                   |  |  |  |
| 20. H          | low much do you                                | <b>\$0-\$50,000</b>                                                                                                                                                                                                                                                 | \$1,000,001-\$10 million                                                                                                                                                                             | \$500,000,001-\$1 billion                                                  |  |  |  |
| е              | stimate your liabilities                       | <b>550,001-\$100,000</b>                                                                                                                                                                                                                                            | \$10,000,001-\$50 million                                                                                                                                                                            | \$1,000,000,001-\$10 billion                                               |  |  |  |
| to             | o be?                                          | <b>\$100,001-\$500,000</b>                                                                                                                                                                                                                                          | \$50,000,001-\$100 million                                                                                                                                                                           | \$10,000,000,001-\$50 billion                                              |  |  |  |
|                |                                                | ☐ \$500,001-\$1 million                                                                                                                                                                                                                                             | □ \$100,000,001-\$500 million                                                                                                                                                                        | ☐ More than \$50 billion                                                   |  |  |  |
| Part 7         | Sign Below                                     |                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                      |                                                                            |  |  |  |
| For yo         | ou                                             | I have examined this petition, a correct.                                                                                                                                                                                                                           | nd I declare under penalty of perjury that the                                                                                                                                                       | e information provided is true and                                         |  |  |  |
|                |                                                | If I have chosen to file under C of title 11, United States Code. under Chapter 7.                                                                                                                                                                                  | hapter 7, I am aware that I may proceed, if e<br>I understand the relief available under each                                                                                                        | ligible, under Chapter 7, 11,12, or 13<br>chapter, and I choose to proceed |  |  |  |
|                |                                                | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).                                                                |                                                                                                                                                                                                      |                                                                            |  |  |  |
|                |                                                | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.                                                                                                                                                        |                                                                                                                                                                                                      |                                                                            |  |  |  |
|                |                                                | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |                                                                                                                                                                                                      |                                                                            |  |  |  |
|                |                                                | x Relati                                                                                                                                                                                                                                                            | X X                                                                                                                                                                                                  |                                                                            |  |  |  |
|                |                                                | Signature of Deptor 1                                                                                                                                                                                                                                               |                                                                                                                                                                                                      | Signature of Debtor 2                                                      |  |  |  |
| and the second |                                                | Executed on: O \$ /_                                                                                                                                                                                                                                                | <u>05/2</u> 016                                                                                                                                                                                      | Executed on                                                                |  |  |  |

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| ebtor 1                      | Ronald     | John                             | Stewart   |      |
|------------------------------|------------|----------------------------------|-----------|------|
|                              | First Name | Midd <del>le</del> Name          | Last Name |      |
| ebtor 2<br>pouse, if filing) | First Name | Middle Name                      | Last Name |      |
| ase Number                   |            | the : <u>NORTHERN</u> District o | (State)   | Chec |

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below                                                |                                                                                               |
|-----------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Did you pay or agree to pay someone who is NOT an attorne | ey to help you fill out bankruptcy forms?                                                     |
| No                                                        |                                                                                               |
| Yes. Name of Person                                       | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|                                                           |                                                                                               |
|                                                           |                                                                                               |
|                                                           |                                                                                               |
|                                                           | nary and schedules filed with this declaration and that they are true and                     |
| correct.                                                  |                                                                                               |
| * MANAGE                                                  | <b>x</b>                                                                                      |
| Signature of Debtor 1                                     | Signature of Debtor 2                                                                         |
| Date : <u>08/05/2</u> 016                                 | Date                                                                                          |
| MM / DD / YYYY                                            | MIN / DD / TTTT                                                                               |

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## DISCLAIMER Debtors have read and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE[1]!

Dated: 08 / 05 /2016

Ronald John Stewart, III

X Date & Sign

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Ronald John Stewart III / Debtor

Bankruptcy Docket #:

Judge:

## VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 08105 /2016

Ronald John Stewart, III

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Part 4:

Sign Below

By signing here, I declars under perhalty of perjugating the information on this statement and in any attachments is true and correct.

Ronald John Stewart, III

Date: 08/05/2016

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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| Debtor 1 | Ronald                 | John Stewart                 |                                     | Case Number (if known)                             |  |
|----------|------------------------|------------------------------|-------------------------------------|----------------------------------------------------|--|
|          | First Name             | Middle Name                  | Last Name                           |                                                    |  |
| Part 5:  | Sign Below             |                              |                                     |                                                    |  |
|          | By signing here I de   | clare under penalty of periu | ry that the information on this sta | tement and in any attachments is true and correct. |  |
|          | by signing fiere, i de |                              |                                     | •                                                  |  |
|          | 1/2//                  | 7                            | -50                                 |                                                    |  |
|          | Ro                     | nala John Stewart, II        | l .                                 |                                                    |  |
|          |                        |                              |                                     |                                                    |  |
|          | Date: Dated: /         | <u>981 05 1</u> 2016         | ·                                   |                                                    |  |
|          | Date. Dated. L         | 70,                          |                                     |                                                    |  |

Form B 201A, Notice to Consumer Debtor(s)

In re Ronald John Stewart III / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 08 / 05 /2016

Ronald John Stewart, III

X Date & Sign

Dated: 8 /5 /2016

Atterney: Adam Emil Suchy

Record # 715366

Form B 201A, Notice to Consumer Debtor(s)

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